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BMC

Journal of the Canadian
Health Libraries Association

Bibliotheca Medica Canadiana

Le journal de l'Association des
bibliothèques de la santé du Canada

- Medline Records and Reprint Collections
- Romulus: a first look
- Leadership Role for Medical School Librarians
- Workload Measurement Systems

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Bibliotheca
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BIBLIOTHECA MEDICA CANADIANA

The *Bibliotheca Medica Canadiana* is a vehicle providing for increased communication among all health libraries and health sciences librarians in Canada. We have a special commitment to reach and assist the worker in the smaller, isolated health library.

The *Bibliotheca Medica Canadiana* is published 4 times per year by the Canadian Health Libraries Association. Opinions expressed herein are those of the contributors and the editor and not the CHLA/ABSC.

La *Bibliotheca Medica Canadiana* a pour objet de permettre une meilleure communication entre toutes les bibliothèques médicales et entre tous les bibliothécaires qui travaillent dans le secteur des sciences de la santé. Nous nous engageons tout particulièrement à atteindre et à aider ceux et celles qui travaillent dans les bibliothèques de petite taille et les bibliothèques relativement isolées.

Bibliotheca Medica Canadiana est publié 4 fois par année par l'Association des Bibliothèques de la Santé du Canada. Les articles

paraissant dans **BMC** expriment l'opinion de leurs auteurs ou de la rédaction et non pas celle de l'Association.

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Editorial Address / Rédaction:

Peter Schoenberg, Editor
Bibliotheca Medica Canadiana
Library Services
Glenrose Rehabilitation Hospital
10230 111 Avenue
Edmonton, Alberta, T5G 0B7
Tel: (403) 471-2262 x2599
FAX: (403) 471 7976
Envoy: Glenrose.rehab

Subscription Address/Abonnements:

Canadian Health Libraries Association / Association
des bibliothèques de la santé du Canada
P.O. Box / C.P. 94038
3332 Yonge Street
Toronto, Ontario M4N 3R1

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volume 15(3)	3 décembre	1993
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The paper entitled "Disaster plan for a hospital library" published in *Bibliotheca Medica Canadiana* [Oryden, D. Disaster plan for a hospital library. *Bibl Med Can* 1993; 14:139-45] contains portions of an article published previously in the *Bulletin of the Medical Library Association* [Green, D. After the flood: disaster response and recovery planning. *Bull Med Libr Assoc* 1990; 78:303-6]. We regret that this was overlooked and not acknowledged properly. We regret that portions were reproduced without the permission of either the copyright holder or the creator.

The *Bibliotheca Medica Canadiana* paper included the sections "Protocol for dealing with fire or flood in the library" and "Disaster record" that were altered versions of the unpublished work of D. Green and were reproduced without her permission. They were reproduced from D. Green's *Hospital Library Procedure Manual*, The Hospital for Sick Children, Toronto. We regret that this too was overlooked and not acknowledged.

The offer to supply a copy of the article on disk is withdrawn. ■

Errata / Apology

Additional ordering information for *Canadian Directory of Support Groups* (reviewed in BMC 1993 14:149) please make all cheques payable to: Canadian Association of Genetic Counsellors. ■

From the Editors

**Peter Schoenberg
Sandra J. Shores**

What do you get when you leave six librarians alone in a room?

An association!

Questions to consider:

- Is this diversity a strength?
- Do we have too many associations?
- Should we start new associations?
- Are we incapable of saying no?

These questions are prompted by the results of the first BMC Reader's Survey, the results of which are reported in this issue, and by the spirit of retrenchment that dominates my corner of the world.

As governments at all levels try to spend less and do less, as library staffs try to do more with less, it seems only natural to reconsider any activity that does not immediately contribute to personal, library or corporate well being.

There is a real danger that association participation will significantly drop. It is very easy to say, "who has the time". I would suggest that every librarian ask themselves a few questions before getting involved with any library association:

- what are my options?
- what will it cost (your dollars and your time)?
- what can I contribute?
- what are the benefits?
- is it a well run association?

As in so many other aspects of our lives, the key is making good choices. It is not the volume of work done but the value of the work that ultimately matters.

In light of all of the questions, I offer the following:

CHLA/ABSC is an association that

- makes a difference
- is financially stable
- encourages local participation and development
- tackles national issues
- offers real benefits

I think these points make CHLA/ABSC an organization that gives more than it takes. ■

Dear Colleagues,

As spring approaches, I'm struck by the rapidity of change that our country and our world have experienced in the last year. We have seen the face of Europe change profoundly; new nations have been created and new wars as inevitably started as power balances shift. In Canada, we have all in some way felt the effects of the liberalization of trade boundaries within North America, free trade and a deep recession. In the last months, Bill Clinton's victory in the U.S. elections and the announcement of Brian Mulroney's resignation in Canada have set in motion further political change.

As the economic trade boundaries expand and nations jockey for position within an international arena, I am particularly struck by the strong sense of nationalism that seems to be growing in Canada. We Canadians take pride in our culture and uniqueness. For a small nation, we have a remarkable impact on areas as diverse as international trade, industry, telecommunications and diplomacy.

As my tenure as CHLA/ABSC President draws closer to an end, I am proud to have led a national organization that has realized so many achievements in the last year and a half. The Association approved a new CE course based on the handbook **Workload Measurement Systems: A Guide for Libraries**, both of which have proved very popular. A new liaison position has been created by the Board to carry on the work of the MIS Task Force (watch for further details in

Bibliotheca Medica Canadiana). Our national journal, BMC, underwent a radical new facelift. And CHLA/ABSC has begun, with your help, to update and expand the strategic planning process begun over five years ago. Through this process, we are able to define more clearly our financial direction and, most importantly, to encourage and support chapter initiatives.

At this exciting time for CHLA/ABSC and its chapters, I urge you to continue to support your Association by renewing your membership, running for office on a provincial or national basis, and attending the annual conference in Banff this year. If you have already received your Preliminary Program you know that the theme this year is Peak Performance. Dr. Edward Huth, the renowned editor of The Online Journal of Current Clinical Trials, will give the keynote address. He will be followed by speakers discussing maintenance of clinical competence, teaching information literacy, and empowerment. Exciting CE courses range from topics like telecommunications issues to TQM. And all are given by and for Canadians. Of course, I needn't say anything about the spectacular setting! Please return your registration form as soon as possible and join us for a wonderful five days of networking and education.

As I learned at the National Summit on Information Policy (reported in the last issue), we Canadians have a lot to be proud of. We are recognized and respected as leaders worldwide, but to retain this position we must work together and support our respective organizations. ■

A Word from the President

Jennifer Bayne

*Director, Library Services
The Toronto Hospital
(General Division)*

Un Mot de la Présidente

Jennifer Bayne

*Directrice des services
de bibliothèque
The Toronto Hospital
(General Division)*

Chers/chères collègues,

Le printemps approche, et je m'arrête un instant pour réfléchir à la rapidité des changements survenus au cours de l'année dernière et ressentis dans notre pays comme partout dans le monde. Ces changements ont profondément affecté la face de l'Europe; de nouvelles nations ont été formées, et inévitablement, de nouvelles guerres ont éclaté à la suite des déplacements qui ont affecté la stabilité des puissances politiques. Au Canada, nous avons tous d'une façon ou d'une autre ressenti l'effet du relâchement des limites commerciales en Amérique du Nord, du libre échange, et d'une récession tenace. Au cours du mois dernier, d'autres changements politiques ont été mis en marche à la suite de la victoire de Bill Clinton aux Etats-Unis. et de l'annonce de la démission de Brian Mulroney au Canada.

Au moment où les frontières commerciales et économiques s'étendent et que les nations manoeuvrent pour se caser une place dans l'arène internationale, je suis particulièrement impressionnée par le sentiment nationaliste solide qui semble se développer au Canada. Nous sommes fiers de notre culture et de notre caractère unique. Même si nous sommes une petite nation, nous nous faisons valoir dans des secteurs divers tels que le commerce international, l'industrie, les télécommunications et la diplomatie.

Comme mon mandat de présidente de l'ABSC/CHLA tire à sa fin, je suis fière d'avoir dirigé une organisation nationale qui a tant accompli au cours de la dernière année et demie. L'Association a approuvé un nouveau cours de perfectionnement basé sur le manuel «*Workload Measurement System: A Guide for Libraries*», les deux ayant démontré leur grande popularité. Un nouveau poste de liaison a été créé par le Conseil afin de mettre à exécution le travail du groupe d'action MIS (voir le BMC pour de plus amples renseignements). Notre journal national, le BMC, a subi une rénovation radicale, et avec votre aide, l'ABSC/CHLA a commencé à

mettre à jour et à développer le processus de planification stratégique commencé il y a cinq ans. Grâce à ce processus, nous sommes capables de définir plus clairement la conduite de nos finances, et surtout, d'encourager et de supporter les initiatives des chapitres.

En ce moment stimulant pour l'ABSC/CHLA et ses chapitres, je vous exhorte à supporter votre association, en renouvelant votre adhésion, en posant votre candidature au niveau provincial ou national, et en assistant à la conférence annuelle à Banff cette année. Si vous avez déjà reçu votre programme préliminaire vous êtes au courant que le thème cette année est «Peak performance/ Rendement maximum». Le docteur Edward Huth, rédacteur en chef renommé de «*The Online Journal of Current Clinical Trials*», prononcera le discours d'ouverture, et sera suivi d'autres conférenciers qui mettront en question le maintien des compétences en clinique, l'enseignement des connaissances en matière d'information, et l'acquisition de pleins pouvoirs. Des cours de perfectionnement attrayants abordent des sujets tels que la télécommunication et le TQM (Gestion concentrée sur la qualité). Et tous sont présentés par et pour des canadiens. Bien entendu, nul besoin de mentionner le décor spectaculaire. Je vous prie de retourner votre formulaire d'enregistrement aussitôt que possible et soyez des nôtres pour cinq journées magnifiques où vous pourrez profiter de la gestion de réseau et de discussions éducatives.

Lors de la conférence «National Summit on Information Policy», (voir le rapport dans le numéro précédent), j'ai appris que nous, Canadiens, pouvons être très fiers. Nous sommes appréciés et respectés comme dirigeants à une échelle globale, mais pour conserver cette réputation, nous devons travailler ensemble et supporter notre propre organisation déjà très respectée. ■

BMC Readers' Survey #1 was enclosed as an insert and printed on page 115 of Volume 14 number 3 1993 issue.

Total CHLA/ABSC Membership as of December 31, 1992 was 393 (279 regular, 110 institutional, 3 emeritus, 1 student).

70 survey forms were completed and returned. 3 responses indicated that the respondents had given up all their memberships.

67 survey forms were usable (representing 17% of the membership) and are reported below:

Only **current** memberships are included below:

Number	Percentage*	Association or chapter
67	(100%)	CHLA/ABSC
51	(76%)	Local CHLA/ABSC chapter
40	(60%)	Medical Library Association (MLA)
25	(37%)	Ontario Hospital Libraries Association
21	(31%)	Canadian Library Association (CLA)
21	(31%)	Local MLA chapter (excludes interest groups)
16	(24%)	CLA Division (CASLIS - 13, CACUL - 3)
7	(10%)	Special Libraries Association (SLA)
1	(1%)	l'Association pour l'avancement des sciences et des techniques de la documentation

** percentages are included solely for comparative purposes. Percentages cannot be assumed to represent the membership.*

CHLA/ABSC Chapters

Responses were received from 13 different chapters. Three chapters had a significantly higher number of responses. A special thanks to our newest, and one of our smallest chapters, the Maritimes which sent 4 responses.

If some few cases a specific chapter was not indicated and could not be determined. Numbers of responses from each chapter:

- 11 Toronto (37 responses were from Ontario)
- 9 British Columbia (10 responses were from B.C.)
- 8 Northern Alberta (12 responses were from Alberta)
- 4 Maritimes & Ottawa/Hull & Southern Alberta
- 3 Kingston
- 2 Manitoba
- 1 London & Montreal & Newfoundland/Lab. & Saskatchewan & Waterloo

BMC Reader's Survey #1 — Results

MLA Chapters

BMC Reader's Survey

(continued)

Two MLA chapters represented all the responses.

10 responses indicated membership in at least one MLA Interest Group. The memberships in interest groups were not included in any totals or averages.

12 Upstate New York and Ontario

9 Pacific Northwest (largely British Columbia, with a few from Alberta)

Average number of memberships per CHLA/ABSC member: 4.2 memberships in total

Only 6 responses indicated CHLA/ABSC and the local chapter as their sole membership.

Other organizations mentioned, as either current or 1992 memberships:

- *A.I.O.P.I.*
- *A.R.M.A.*
- *Alberta Library Technicians*
- *American Society for Information Science*
- *American Library Association*
- *Atlantic Provincial Library Association*
- *British Columbia Library Association*
- *Canadian Association for Information Science*
- *Canadian Council of Health Services Executives*
- *College and Research Libraries (ALA)*
- *Corporation des bibliothécaires prof. du Québec*
- *European Association of Health Information Libraries*
- *Greater Edmonton Library Association*
- *International Association of Agricultural Information Specialists*
- *International Association of Aquatic Librarians*
- *Library Association (U.K.)*
- *M.D.M.L.G.*
- *M.I.G. (Maritimes)*
- *Manitoba Library Association*
- *North Atlantic Health Science Libraries Association*
- *Ontario Association of Library Technicians*
- *Ontario Library Association*
- *Saskatchewan Library Association*

This work was supported by a grant (#90-17) from the Physicians of Ontario through the PSI Foundation.

Purpose

This paper attempts to answer the three questions posed in the title. Is it useful to download certain Medline fields to index an existing personal reprint collection? Is it feasible to do such retrospective downloading? And finally is it legal to download Medline records for this purpose? The answer to the first question is largely self-evident, though a literature search was useful in confirming some assumptions. To answer the second question a test download had to be undertaken and monitored, using an existing collection of reprints as a model. The final question concerning the legality of downloading Medline records, particularly in Canada, has not been answered to my satisfaction. If the readers of this paper can provide further clarification of this issue, it would be greatly appreciated.

Introduction

Many users of medical libraries have substantial personal collections of reprints. It is increasingly common for such collections to be organized and indexed using a personal computer. Computerization can enhance searching for articles in reprint collections. Several personal bibliographic database products are available for this purpose. They permit searching by any author, by words in the title or abstract, by keyword, as well as by other fields such as journal name and date. Two

of the most important components of an efficient personal database are a standardized or controlled vocabulary of keywords, and secondly, the provision of as many alternative search terms as possible for each article. The provision of standardized Medical Subject Headings or MeSH terms with all Medline records, as well as the presence of abstracts with the majority of them, makes Medline an ideal source for records in a personal bibliographic database. Researchers and physicians could incorporate these MeSH terms and abstracts into their computerized databases with no more time and effort than manually entering the bibliographic record.

Mutually compatible software for literature searching and citation management facilitates the importing of bibliographic and indexing information for current reprints. A recent survey indicated that 89% of one hospital's physicians had personal reprint collections and that 52% of these patrons used a microcomputer to organize these collections (1). In a similar survey conducted in 1989 in a Canadian faculty of Health Sciences, 41% of full-time faculty reported using microcomputers for filing reprints (2).

The majority (70%) of those physicians in the first study cited above, who indicated that they used

Downloading Medline Records to Index a Personal Reprint Collection: Is it useful, is it feasible, is it legal?

David A. Colborne, M.L.I.S.*

Reference Librarian, Library Services, University Hospital, London, Ontario, Canada N6A 5A5

William C. Vezina, M.D.

Department of Radiology and Nuclear Medicine, University Hospital, London, Ontario, Canada N6A 5A5

*Downloading Medline Records
to Index a Personal Reprint
Collection: Is it useful, is it
feasible, is it legal?*

(continued)

microcomputers for filing or indexing reprint collections, also indicated that they used Reference Manager (Research Information Systems, Inc., Encinitas, CA) (1). Other similar software products which can be used for the same purpose include Pro-Cite (Personal Bibliographic Software, Ann Arbor, MI) and Papyrus (Research Software Design, Portland OR). Reference Manager has many excellent features including manual and automated data entry options, compatibility with most major electronic versions of Medline, multiple term and multiple field retrieval capabilities, and compatibility with major word-processing programs for creating manuscripts that adhere to the citation and bibliography requirements for more than 100 scientific journals.

Retrospective Conversion Of Reprint Collections: Is It Useful?

In recent years many libraries have faced the task of retrospective conversion of their catalogues. One of the goals of such conversions is to combine controlled vocabulary with the retrieval power of the computer. Many physicians and researchers find themselves in an analogous situation. Access to their reprint collections is limited by their current indexing systems. Often they started amassing reprint collections before the advent of sophisticated citation managers like Reference Manager, Papyrus, and Pro-Cite. Users who have acquired such programs for their existing collections have been faced with the major task of

indexing and bibliographic information. Invariably this information has had to be entered manually into the computerized database. In some instances the keywords provided by the journals, or keywords assigned by the user, are manually entered into the keyword field.

There are at least three main problems associated with such a manual conversion. First, manual entry of any fields, even if it is just the fields containing bibliographic information, is a time consuming process. This is especially true if the retrospective conversion is to be done for a large collection of reprints.

Second, there is the lack of retrieval terms available for subject searching in a database that has only title textwords. Not only is there no controlled indexing vocabulary, but the natural language terms are limited as well. Even where keywords from disparate sources have been used, the process of doing subject searches in the reprint database is rendered less precise by the lack of keyword control. Literature searches in Library Literature and Medline indicated that little research had been done to assess how rates of recall and precision were affected by use of MeSH. A more general literature search in Library Literature on the relative merits of using controlled versus natural language search terms revealed that there have been two distinct schools of thought on this matter. Lancaster, in a recent review of this debate stated that the best rates of recall and precision require a combination of controlled vocabulary and a good selection of natural language terms (3). This

should come as no surprise since having a single controlled vocabulary for keywords, such as MeSH, and a rich source of natural language terms, such as those found in an abstract, provides optimal situation for maximizing either recall or precision. In addition having both of these features takes full advantage of the searching capabilities of software such as Reference Manager.

The third potential problem is one of quality control. Typographic errors can interfere with the retrieval capabilities of an automated system. The number of errors in the new system will depend on who is manually entering the data.

The Feasibility Of Using Medline As A Source Of Indexing Terms

One solution to the problems associated with manual conversion of the reprint collection is to use electronic importation of Medline records for all reprints in the collection. It is fast, can provide both a controlled vocabulary and the enhanced textword access provided by abstracts, and has the added benefit of having the National Library of Medicine's level of quality control. To test this solution, this process was carried out with a model collection of 454 reprints from the medical literature. Medline on SilverPlatter (SilverPlatter Information, New Lower Falls, MA) was chosen rather than Grateful Med (National Library of Medicine, Bethesda, MD) as a source of the bibliographic records. This choice was made because no online costs would be incurred and because searching on

CD-ROM permitted the most rapid number of search statements per unit time. We needed a system that a novice could use. Both Medline on SilverPlatter and Grateful Med satisfied this requirement but Grateful Med would have required logging off between all searches. In addition downloading a few hundred abstracts using Grateful Med would have been expensive. Finally we were looking for a system that was compatible with our personal bibliographic database software, again a requirement met by both our CD-ROM and Grateful Med.

Methods

The computers used in this trial were 386SX IBM PC compatible microcomputers.

1. Organizing the collection

In order to preserve the integrity and availability of the collection during the conversion process, a photocopy was made of the first page of every reprint, ensuring that all bibliographic information was on this page. This step was time-consuming and may not be necessary in all instances. This model collection was kept in subject oriented binders to permit browsing by subject. The title pages were kept in subject groupings corresponding to the binder of origin. Within these subject groupings the photocopies were then further sorted chronologically to correspond to the years covered by the compact discs. This chronological sorting could also be modified in those instances

Downloading Medline Records to Index a Personal Reprint Collection: Is it useful, is it feasible, is it legal?

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where multiple disc searching is possible.

2. Searching for records

Searches were done for each individual article. The only real alternative was to conduct broad subject searches which matched the subjects covered in the reprint collection. This would have involved screening the results to retain only those that were in the collection, discarding those that were not, and finally conducting individual searches for those citations present in the collection but not retrieved by the subject search.

The search strategy used was combining the least common author name with the least common word from the article title.

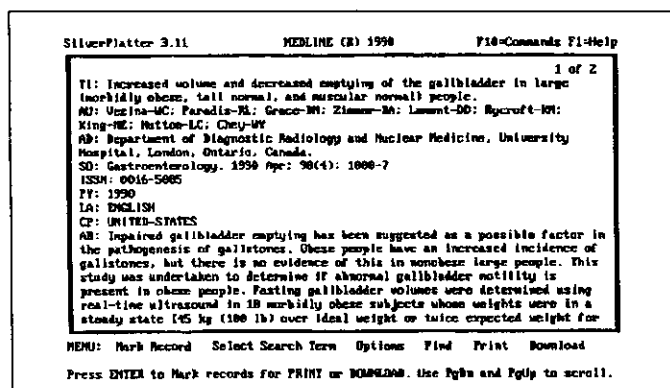


Figure 1

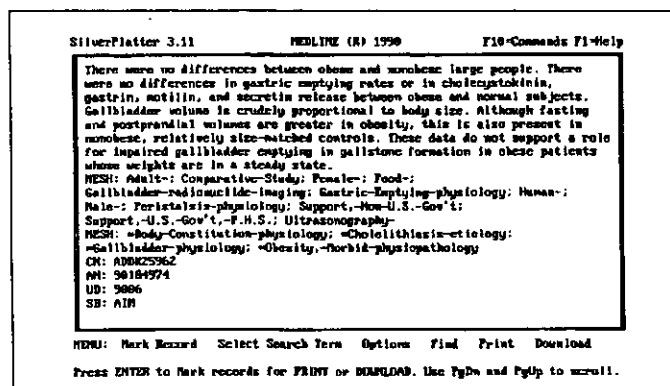


Figure 2

Where such a strategy retrieved more than one record, the results were displayed and the correct record tagged for downloading.

3. Downloading records

The bibliographic citation as well as the MeSH terms and the abstract were downloaded to floppy diskettes. A typical Medline record is shown in Figures 1 and 2. The size of each record was on average 1600 bytes, thus easily accommodating all downloaded records on one high density 5.25" diskette. Records that include only bibliographic and indexing information are typically 600 bytes in size. Downloading parameters were set when the first record from a given subject binder was downloaded. Records were saved as they were retrieved. All titles from a given binder were downloaded to the same file. Names of the files of records were assigned mnemonically so that each filename corresponded to the appropriate subject binder.

4. Importing records

Records were imported in batch mode. Each file of downloaded records from a particular subject binder was imported in one batch. Reference Manager permits adding keywords in this batch mode. In this way the subject binder, i.e. the location of the reprint, could be added automatically to each record. It was added in upper case lettering and was automatically listed at the beginning of the keyword field (See Figure 3). Entering this information for each record

also permits searching for articles by location, a convenient way of printing updated tables of contents or indexes for each binder.

6. Results

Photocopying title pages took 1 minute per reprint. Retrieving and downloading records took 1 minute per reprint. We were able to retrieve 431 (95%) of the reprint records from Medline on SilverPlatter. The remaining 5% were either too old to be covered by Medline, were from journals not covered by Medline, or were abstracts rather than articles. Importing records was done at a rate of 3 seconds per reprint. The total time for conversion of this collection of reprints was approximately 16 hours.

Does Downloading Medline Records Constitute An Infringement Of Copyright?

It is not safe to assume that because a CD-ROM vendor provides a download option for a particular database that it is legal to use that option. Neither does the fact that many personal bibliographic software packages sold in both the United States and Canada provide customized options for automated import of all fields of Medline records.

Attempts to clarify the legality of downloading Medline records, particularly in the Canadian context, have not been successful. The National Library of Medicine (NLM) issues a "Memorandum of Understanding" (4) to domestic individuals or individuals or institutions assigned User ID Codes for

MEDLARS. This "Memorandum of Understanding" applies only to domestic users. Canadian users of Medline have not signed this agreement and cannot look to it for either permissions or limitations.

The memorandum is useful, however, if only to illustrate how difficult it is to know what is copyrighted and what is not. It outlines the terms, conditions, and responsibilities of the NLM and those domestic client individuals or institutions. Two of its terms pertain to downloading of Medline records. Item 6 states that:

Data obtained by downloading portions of the database (i.e., retrieving portions of a database online for subsequent storage on a personal computer) for "personal" use may be retained in machine-readable form by those employing automated technology such as microcomputers. (4)

While this may seem unequivocal with regard to downloading Medline records, Item 4 confuses the issue:

Some material in the NLM databases is from copyrighted publications of the respective copyright claimants. Users of the

Downloading Medline Records to Index a Personal Reprint Collection: Is it useful, is it feasible, is it legal?

(continued)

Editing Journal Reference

Ref ID: 2

Authors: Uexin, M.C.; Paradis, R.L.; Grace, D.H.; Zinner, R.A.; Lamont, D.B.; Rycroft, M.H.; King, M.E.; Hutton, L.C.; Chay, W.Y.

Title: Increased volume and decreased emptying of the gallbladder in large (morbidly obese, tall normal, and muscular normal) people

Source: Gastroenterology 98:1040-1047 (1990)

Reprint: In File

Keywords: BINDER #1; Male; Adult; Comparative Study; Female; Food; Gallbladder radionuclide imaging; Gastric Emptying physiology; Human; Peristalsis physiology; Support, Non U.S. Gov't; Support, U.S. Gov't; P.H.S.; Ultrasonography; Body Constitution physiology; Cholelithiasis etiology; Gallbladder physiology; Obesity, Morbid physiopathology

Notes: Impaired gallbladder emptying has been suggested as a possible factor in the pathogenesis of gallstones. Obese people have an increased incidence of gallstones, but there is no evidence of this in nonobese large people. This study was undertaken to determine if abnormal gallbladder motility is present in obese people. Fasting gallbladder volumes were determined using real-time ultrasound in

Author Title Misc. Reprint Notes Keyword Dup Check
Save Exit Quit No save Go Main
<Left> <Right>

Figure 3

Downloading Medline Records
to Index a Personal Reprint
Collection: Is it useful, is it
feasible, is it legal?

(continued)

database are referred to the publication data appearing in the bibliographic citations, as well as to the copyright notices appearing in the original publication, all of which are incorporated by reference. (4)

How does one distinguish between material in NLM databases that is copyrighted and material that is not? Is Medline one of those databases that contains copyrighted material? Are abstracts copyrighted? The copyright implications of downloading abstracts for personal use are especially unclear, since they are the intellectual property of either the author or the publisher of the original article. Even for American users, obtaining permission from the copyright holder is the most prudent course of action if abstracts are to be downloaded.

Canadian situation

Canadian users of Medline fall into two groups: MEDLARS users and those who have leased Medline through a third party such as a CD-ROM vendor. Canadian users of MEDLARS have signed a contract with CISTI. The conditions on the reverse of the CISTI contract do not deal with any of the specific uses dealt with in the "Memorandum of Understanding". It states simply that:

The MEDLARS Subscriber shall

- a) *not infringe copyrights*
- b) *not resell, republish or redistribute NLM databases in machine readable or any other format.*
- c) *comply with any future database restrictions which may be imposed and will be*

described in the MEDLARS Rate Schedule (5)

According to a letter that I received from the Head, MEDLARS Management Section, the contents of Medline are copyrighted outside of the United States. It is produced by a U.S. government agency, and as such its contents are not copyrighted domestically. Does this mean that Canadians and Americans have substantially different rights when it comes to utilizing Medline records? The "Memorandum of Understanding" does not apply to Canadians, and Canadian copyright legislation is in progress and provides no guidance. It is even questionable as to whether this situation would constitute "fair dealing" since the downloading of this information would actually be the second copy of the abstract that the researcher or physician would have in his or her possession, the print copy being the first.

Canadians using leased versions of MEDLARS databases should consult the contracts, licenses, and agreements that are part of their lease.

In the pursuit of clarification of the specific contractual permissions and limitations involved in the issue of downloading Medline records, I approached the producer of the database, the National Library of Medicine. The NLM's MEDLARS Help Desk insisted that all questions from Canadians be directed to CISTI. CISTI staff were able to provide me with the NLM's "Memorandum of Understanding" and the terms and conditions of their own MEDLARS Canada contract, with which Canadian users must

comply. I was also provided with the name of a contact at NLM. This individual, the Head of MEDLARS Management Section in Bethesda was contacted about the downloading issue. In her written response she restated some of the points laid out in the "Memorandum", adding that organizations or institutions may download a certain number of records per month for reuse within that organization or institution, these users being solely responsible for compliance with any copyright restrictions. She also stated that Medline is copyrighted outside the United States. She did not discuss downloading for personal use, other than referring me to the "Memorandum". Finally she stated that "the library does not provide, and this letter does not constitute, legal clarification of this matter."

In short, Canadian users of Medline have no assurance that downloading any portion of the database does not constitute a copyright infringement. In the words of the NLM's Head of MEDLARS Management Section, "you should consult legal counsel before using Medline records".

Conclusions

● **Usefulness:** Indexing an existing personal collection of reprints by downloading bibliographic citations, MeSH terms, and abstracts from Medline would be extremely useful in improving the precision and recall of information retrieval when subject searching in the database. It provides a means of ensuring that the resulting database has complete and accurate bibliographic information, a controlled

vocabulary and a rich source of natural language terms.

Feasibility: Using CD-ROM in conjunction with software such as Reference Manager is a simple and efficient method of retrospectively converting filing and indexing systems for existing personal reprint collections. It is faster and more accurate than manually entering records with their abstracts and MeSH terms. A test conversion of indexing information for 454 reprints took 16 hours to complete, with records for 95% of the reprints being found in Medline.

Legality: In spite of reading licensing agreements, memoranda of understanding, and a letter from a MEDLARS administrator, and in spite of discussing the issue with staff at both NLM and CISTI, the question of whether downloading any portion of Medline records in Canada constitutes an infringement of copyright remains unclear. NLM staff advised, both over the phone, and by letter, that when considering downloading portions of the MEDLARS databases, one should "consult legal counsel". Until this issue is resolved, any Canadian librarian considering downloading of Medline records should follow that advice.

The authors acknowledge the assistance of Liz Czanyo, Janice Dale, and Jan Figurski in setting up and performing the trial download. ■

Downloading Medline Records to Index a Personal Reprint Collection: Is it useful, is it feasible, is it legal?

(continued)

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Romulus : a first look

Peter Schoenberg

Library Services
Glenrose Rehabilitation
Hospital
10230 111 Avenue
Edmonton, Alberta, T5G 0B7

Introduction

Romulus is a new Canadian product from CISTI and the National Library that could change the way your library locates and requests journal articles for interlibrary loan.

Romulus addresses two of the three main interlibrary loan functions, (searching, requesting and managing).

Searching: Romulus uses a CDROM to store the journal and newspaper holdings of hundreds of canadian libraries.

Requesting: Romulus includes telecommunications software that can send requests via ENVOY, CAN/OLE or GEMDES.

Romulus does not include an interlibrary loans management function for statistics, record keeping, accounting or other administrative functions.

Product specifications	
Cost:	\$625 + GST single site licence \$950 + GST network licence
Hardware requirements:	IBM AT, 286, 386, 486 or compatible One hard disk with 1 MB of free disk space 640K RAM (see installation comments) One 5.25" or 3.5" diskette drive One CDROM drive Hayes or Hayes compatible modem
Software requirements:	MS-DOS 3.1 or higher
Updates to CDROM:	Annually
Number of CDROM Discs:	One
Languages:	English or French
Publisher:	The National Library of Canada 395 Wellington Street Ottawa, Ontario, K1A 0N4 - and - Canada Institute for Scientific and Technical Information National Research Council of Canada Montreal Road Ottawa, Ontario, K1A 0S2
Distributor:	Publications Sales and Distribution National Research Council of Canada Montreal Road Ottawa, Ontario, K1A 0S2

The best feature of Romulus is the integration of searching and requesting functions. The merging of several separate union lists and the relative ease of searching are also significant benefits. Strengths and weaknesses will become more apparent as the product is used by more libraries. This "first look" will try to point out some of the specific highlights and lowlights of the new product.

Contents of the disc

Four lists of locations have been merged.

Union List of Scientific Serials in Canadian Libraries (ULSSCL)

The ULSSCL is used to produce the Canadian Locations of Journals in Medline subset. The list now includes over 90,000 records from more than 320 Canadian libraries. This list has been a standard source for academic health sciences libraries and most smaller libraries for years.

Union List of Serials in the Social Sciences and Humanities (CANUC:S)

The CANUC:S will be a new resource for many health libraries. From the point of view of a hospital library, having access to this list is a great benefit. Library clients are increasingly working in a multidisciplinary structure and their requests reflect this diversity. Psychologists, social workers, nurses and many other allied health professionals make requests well outside the range of Medline. Additionally, access to this list can be used to improve service to hospital ad-

ministrators who are interested in the human resource, management and business literature. The list contains more than 120,000 serial titles from more than 400 Canadian libraries.

CISTI Serials List

54,000 serial titles held by CISTI are listed.

Union List of Canadian Newspapers

Most health libraries and especially hospital libraries will make less use of these listings.

Installation

The installation function for Romulus is straightforward in appearance. The software prompts the installer for the required information and option selections. Most of the installation involves giving Romulus the information for telecommunication. You will be asked for your CAN/OLE i.d., local datapac number, telecommunications port and other modem settings. Because Romulus is both a CDROM searching tool and a telecommunications tool, the potential for conflicts with existing systems is doubled.

The good news about a completed installation is that there is a *Revise installation* function that takes you directly to an "Installation Summary" display.

It is frustrating that the installation program will recopy all the Romulus files from the system disk(s) when any change is made in the set-up. This can really slow the process of trouble shooting an installation problem.

Romulus: a first look

(continued)

Romulus: a first look

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The Romulus specifications state that 640K RAM is required. If your computer does not have enough RAM available you will receive the following message:

*** Installation Problems ***

Romulus may have difficulty with certain functions

Problem: Minimum 640K of available memory required

Solution: Check for memory resident programs and remove them

The error message is clear and does offer a valid solution. However, the "certain functions" that are disabled include the ability to search the CDROM disk and the statement of the problem is misleading. Romulus does not require 640K of available memory. Romulus does require 530K of conventional memory (not extended or high memory). You may have to remove your memory resident programs to allow Romulus to function. If you have DOS 5.0 or higher, or other memory management software, you may be able to move other programs out of conventional memory and into extended or high memory.

If you have other CDROM software on the same computer that uses Microsoft Extensions you may have a RAM problem (e.g. Silver Platter). Silver Platter's installation function puts a copy of the file MSCDEX.EXE into your AUTOEXEC.BAT file. Microsoft Extensions is a memory resident program and is invoked every time you start your computer. One partial solution is to put the MSCDEX.EXE line into a .BAT file that you use to start your Silver Platter software.

The next issue is dealing with the modem. Given the incredible variety of brands, ages and compatibility of modems in use today it is not surprising that some glitches may arise. Our modem would simply not communicate with Romulus. If your modem is not responding to Romulus, check the communication port settings, and call the support line. The following changes to the Romulus file DIALOUT.RCC solved our problem:

Lines were:

```
send ("AT&F&C1\r");    /* factory configuration */
delay(40);
```

Lines changed to:

```
/* send ("AT&F&C1\r");    /* factory configuration */
/* delay(40); */
```

The symbols (/* */) tell the computer to ignore the commands contained within them. It was this "factory configuration" command that was causing the problem with our modem.

If you have abundant RAM memory, a truly compatible modem, and a standard CDROM drive installation is very straightforward and very easy.

Starting the software

Password control is optional. The password allows users to have "full access" to Romulus (Figure 1). Without the password, Romulus can be searched but requests will not be sent. This level of security allows Romulus to be safely placed on a public access computer.

The next screen of Romulus presents the menus that are used for searching, (Figure 2). Romulus uses a plain drop down menu display for navigating the search functions. Although the look is quite sparse, colour is used to highlight. The relative sparseness also allows the software to present the user with a number of open boxes, workspaces and display areas at once without becoming too distracting.

Format can be used to switch between three display formats for retrieved records. Brief format presents enough information for most interlibrary loan purposes. Full format includes more complete history, relationship, varying title, and numbers information. The most complete format is the CAN/MARC format, which includes all the CAN/MARC fields from the original DOBIS record along with the CAN/MARC tag coding. Tag 859 was created for Romulus to identify the "product source" of the record, (e.g c CANUC:S, n Union List of Canadian Newspapers, s CISTI Serial List, u Union List of Scientific Serials in Canadian Libraries). The ability to download these CAN/MARC records could be particularly useful as part of a journals

Romulus: a first look

(continued)

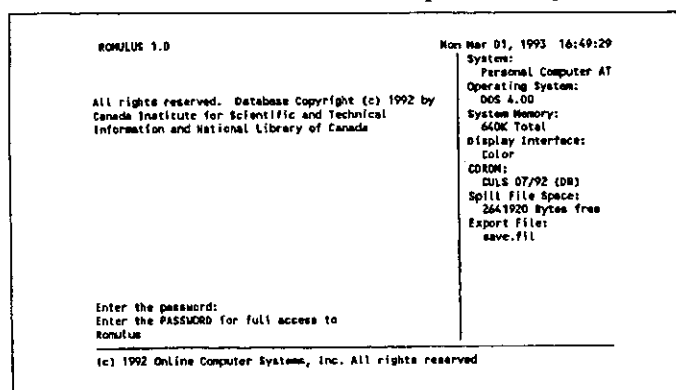


Figure 1

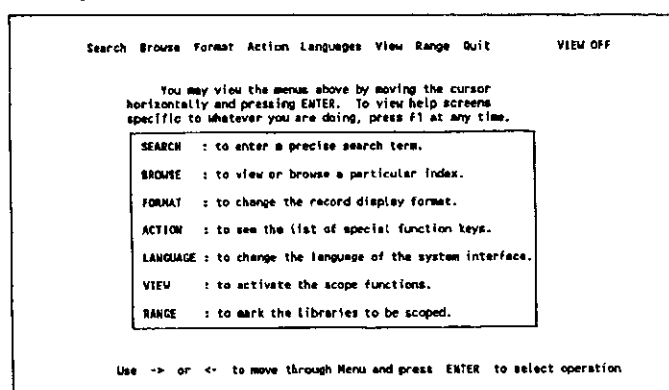


Figure 2

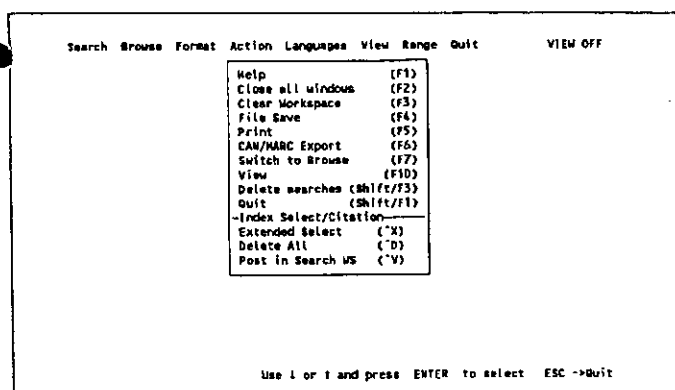


Figure 3

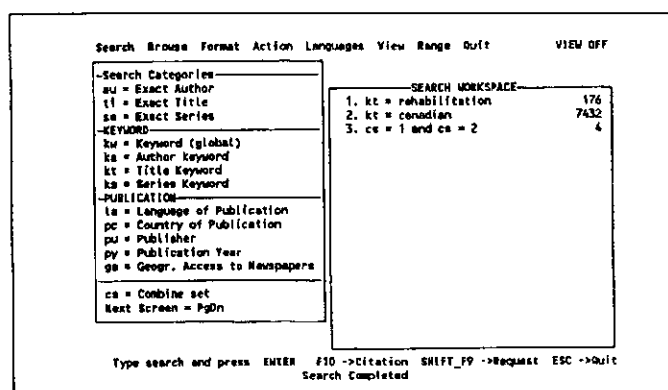


Figure 4

Search Browse Format Action Languages View Range Quit VIEW OFF

SEARCH WORKSPACE

1. kt = rehabilitation 176

Title	Citations	Author	Date
Annual report.		Canadian Rehabilitation Council	1960
Canadian journal of rehabilitation			1987
CARP news /			1970
Home health care : the Canadian j		Home health care (Toronto, Ont.)	1988

ENTER ->Select ESC ->Quit

Figure 5

Search Browse Format Action Languages View Range Quit VIEW OFF

SEARCH WORKSPACE

1. kt = rehabilitation 176

Title	Citations	Author	Date
Canadian journal of quality assurance : a publication o	14		
Canadian journal of radiography, radiotherapy, nuclear	3		
Canadian journal of radiography, radiotherapy, nuclear	1		
Canadian journal of radiography, radiotherapy, nuclear	1		
Canadian journal of regional science	1		
Canadian journal of regional science = la revue canadi	2		
Canadian journal of rehabilitation	1		
Canadian journal of rehabilitation = Revue canadienne d	1		
Canadian journal of religious thought	1		
Canadian journal of remote sensing	2		
Canadian journal of remote sensing (microform)	1		

TYPE ->Search Term ENTER ->Select Del ->Delete ESC ->Quit

Figure 6

Search Browse Format Action Languages View Range Quit VIEW OFF

Index Items selected : 2
Posting : 1

Selected : 1
Displayed : 1

Title	Citations	Author
Can		

Brief Record

Title statement: Canadian journal of rehabilitation =
Revue canadienne de réadaptation.
Imprint: Edmonton : Canadian Association for
Research in Rehabilitation, c1987-
ISSN: 0828-0827
DORIS Document Number: 007597510
Volume designation: Vol. 1, no. 1 (fall 1987)-

FB ->UNION Holdings F9 ->CISTI Holdings SHIFT_F9 ->Request ESC ->Quit

Figure 7

Search Browse Format Action Languages View Range Quit VIEW OFF

SEARCH WORKSPACE

1. kt = rehabill 176

Selected : 1
Displayed : 1

Title	Citations	Author
Ann		
Can		
CAR		

Brief Record

Title statement: Canadian journal of rehabilitation =
Revue canadienne de réadaptation.

ACGH 1-
AEU 1-
ALU 4-
BVAN 2-
HAM 1-
HEND 1-
ONAB 1-

ENTER ->Profile SHIFT_F9 ->Mark ESC ->Quit

Figure 8

Romulus: a first look

(continued)

retroconversion process. The CAN/MARC format is also useful in determining the language of the journal or newspaper.

Action displays the "special function keys" that can be used to speed up progress through the various menus, (Figure 3). Function 2 - *Close all windows* is helpful for moving quickly from the end point of a search back to the base menus.

Searching for locations

Choosing *Search* mode presents the user with a search workspace and a menu of specific search options, (Figure 4). The points of access for searching are clearly presented and the workspace displays the progress and results of searches. The search software is quite basic and has a few quirks. Titles that contain the word "and" must be searched using

keyword title or by using quotation marks and exact title, (e.g kt= memory and cognition or ti = "memory and cognition"). Combining sets with the cs = 1 is awkward. Search results are displayed and the specific title required can be easily selected, (Figure 5).

Choosing the *Browse* mode presents the user with the beginnings of an alphabetic list of journal titles. Typing the title opens a second box which displays the typed information to be browsed. Moving through the alphabetic list uses the standard Page Up/Page Down and cursor keys. The required title can be easily selected, (Figure 6). It should be noted that using the *Range* and *View* functions appears to be limited to the *Search* mode.

The verification and requesting steps are the same, whether the title

Search Browse Format Action Languages View Range Quit VIEW OFF

ILL REQUEST-Serial

>Req To:ILL.ACCH
 Req Date: 19930301
 Title :Canadian journal of rehabilitation = Revue canadienne de rééducation
 Place :Edmonton :
 Publisher :Canadian Association for Research in Rehabilitation,
 Vol./Iss: Date:
 Article Author:
 Article Title :

Page(s) :
 DOBIS : 007597510 LCCN : cn B9039068
 ISSN : 08280827 OCLC : ocn17511968 RSN :
 Report No.: Other Nos.:
 CISTI No :
 Remarks:

Type data and press ENTER F8 ->Next screen ESC ->Cancel request

Figure 9

Search Browse Format Action Languages View Range Quit VIEW OFF

SEARCH WORKSPACE

1. At = Rehabil

OTHER DELIVERY INSTRUCTIONS

>Your Name : LIBRARY SERVICES
 Organization Name: GLENGROSE REHABILITATION HOSPITAL
 Library Symbol : AEG
 Account Number :
 Client's Name :
 Need before :
 Delivery Service : 1 (Address) 2 (JUTS) 3 (LDS)
 4 (PERMUTILL) 5 (Priority Post)
 6 (Courier) 7 (Fax) 8 (Pickup)

Type data and press ENTER F8 ->Save F7 ->Print ESC ->Previous screen

Figure 10

ROMULUS: ROMULUS COMMUNICATIONS

MAIN MENU

SEND ILL REQUESTS

1. Send requests via CAN/OLE to CISTI
 2. Send requests via ENVOY to all other libraries
 3. Send requests via GEMDES to all other libraries

CHECK ILL REQUESTS SENT

4. Check status of requests sent
 5. List or delete ILL requests sent
 6. Check ENVOY
 7. Check GEMDES

8. Create and edit communications for direct connection

C-> CAN/OLE D-> DOBIS F-> Francais R-> Romulus Q-> Quit to DOS

Menu Selection:

Figure 11

Search or *Browse* function. The selected item is displayed in the chosen format, (Figure 7). Having verified the title, all of its locations or just CISTI's holdings can be displayed. Library codes with brief holdings information are displayed in alphabetical order (Figure 8).

Completing the request

The first step is to select a location. If more information is required about any library, an ILL "profile" is available. One keystroke displays: address, telephone, fax, and envoy information; interlibrary loan policy; charges for service; materials or collections not available for loan; the date the profile information was last updated. The profiled libraries are not limited to those having holdings listed, information is available for 4,300 libraries.

The selected location and the journal information is placed into an ILL Request form on the screen, (Figure 9,10). Having added the article/client and delivery service information the request is completed. One minor annoyance with the ILL Request form is that the cursor can only be moved down the form. Completed requests may be either printed or saved to be sent electronically.

Romulus saves completed requests into two files. One file is for items to be sent to CISTI via CAN/OLE and the other file is for requests to be sent via ENVOY or GEMDES to all other libraries. The current version of Romulus will not allow requests to be sent automatically to CISTI via ENVOY or GEMDES, or to other libraries via CAN/OLE.

Romulus: a first look

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Romulus: a first look

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Telecommunications software

The telecommunications software, ROMCOM, looks quite different from the drop down menu approach presented in all the previous functions. It has a very basic appearance and does not take advantage of colour, (Figure 11).

It is really only at this stage that the advantages of Romulus's integrated approach become clear.

All the requests that have been completed and saved can be sent. Choosing the appropriate "Send ILL Requests" option will present the user with one final choice. Requests can be sent immediately or at any time in the next 24 hours. Choosing to send immediately to CISTI takes only two keystrokes. Romulus dials CAN/OLE, pausing only for you to enter your password. All the requests for CISTI, that have been saved and not yet sent, are now sent. Romulus sends the requests, disconnects from the remote connection and returns to the Main ROMCOM Menu. If there has been a problem in the transmission a warning message will continue to appear until the requests have been successfully sent or deleted.

ROMCOM also provides the option of dialling ENVOY, CAN/OLE or GEMDES for interactive use. Unfortunately, the ROMCOM software does not allow for saving the interaction into a log file.

Overall usefulness

The cost is reasonable, especially compared with purchasing the four lists as individual items. For libraries that already have CDROM drives there is no investment in hardware. For libraries that do not have CDROM drives, it is another way to justify the investment in hardware.

Both AVISO and InterLEND software will soon be able to work with ROMULUS. We discovered that AVISO users were not able to receive requests from ROMULUS; the required changes to AVISO are in progress. Look for AVISO to shortly be able to incorporate and send downloaded ROMULUS requests. InterLEND has announced that the soon to be released Version 2 of their software is fully compatible with ROMULUS. The imminent integration of existing Inter-library Loans management software with ROMULUS makes ROMULUS all the more attractive.

Despite being a new release, the product has no major problems and represents a good value for libraries looking for a better way to request documents.

Thank you to: A. Goomer, Health & Welfare Canada, Departmental Library, for her comments on the use of Romulus; Dorothy Davey, Medical Information Services, for her comments on Romulus quirks and glitches; and Michelle Slachta who worked very hard to help solve our installation problems. ■

This follows an article written in 1983 (1) and summarizes, from 1980, the work and deliberations of the Special Resource Committee of Medical School Librarians (hereafter referred to as the Committee) of the Association of Canadian Medical Colleges (ACMC). The Committee members are the medical school librarians across Canada, and, in conjunction with the ACMC, they meet every year to continue their leadership role in academic health science librarianship. The report year begins after the Fall meeting and extends through the next Fall's meeting.

This record of activities shows that traditional concerns were frequently discussed such as statistical reporting, sources for funding, interlibrary loans, and the value of the back-up resources and services of the Canada Institute for Scientific and Technical Information, and its Health Sciences Resource Centre. These two agencies were the subject of supporting briefs and letters. At the same time however, the activities of the Committee during this period reflect the considerable changes that were occurring in the 80's in the academic health science libraries.

Technological changes were taking place, and by the end of the decade budgets began to shrink in buying power. The members compared and discussed, with a greater sense of urgency, what their libraries were doing and should be doing in the future to meet the needs of their users. Communication between the members changed as electronic mail emerged. The Committee experimented with the Cosy conferencing

system, and relied on ENVOY for a number of years, and most members began to use the Committee's own listserv by 1990.

The most demanding activity in this period was a study of the health science library resources in Canada, which resulted in "Libraries Without Walls" by M.A. Flower (2) in 1987. The study was supervised by a joint project committee composed of members from the ACMC Committee and the Canadian Health Libraries Association.

The activities listed below are selected as being the most significant in the 1980's history of the Committee.

1980-81	
Chair:	Gwynneth Heaton (Toronto)
Secretary:	Isabel Hunter (Memorial)
Statistics Coordinator:	Audrey Kerr (Winnipeg)

The ACMC initiative to cut some of its committees caused this Committee to confirm its desire and need to remain a Special Resource Committee of ACMC and to make plans to defend its existence with the Board.

Since the Canadian Health Libraries Association now looked after the concerns of the health science libraries, general health library programmes at our meetings were determined to be no longer necessary, and the terms of reference were amended to refocus the Committee on university health science libraries' objectives.

Through ACMC a brief was sent to Francis Fox, Minister of Com-

Leadership Role for Medical School Librarians: a decade of activities.

Gwynneth Heaton

*Head, Science and Medicine
Library
7 King's College Circle
University of Toronto
Toronto, Ontario, M5S 1A5*

Tel: (416) 978-7662

Fax: (416) 978-7666

*Leadership Role for Medical
School Librarians:
a decade of activities*

(continued)

munications, in response to the National Library document "The Future of the National Library of Canada" (3). The Brief endorsed the idea of support for library collections of significance and for a decentralized bibliographic network. It commented on the useful services of the Health Sciences Resource Centre (HSRC) of the Canada Institute for Scientific and Technical Information (CISTI), and urged a public study be done before a decision was made about transferring these services to the jurisdiction of the National Library.

A joint session with the Committees on Postgraduate Medical Education, Continuing Medical Education and Instructional Media dealt with new educational developments.

Work began on a bibliography of medical publications that would serve as a buying guide for Canadian public libraries to reduce public use of the medical libraries.

The Committee wrote to the Deputy Minister of National Health and Welfare (Pamela McDougall) to encourage the development of a master list of statistical information compiled by her Department.

1981-82	
Chair:	Gwynneth Heaton (Toronto)
Secretary:	Isabel Hunter (Memorial)
Statistics Coordinator:	Andras Kirchner (Calgary)

The Committee successfully defended the continued existence of the group as a committee of ACMC, with the Executive Director as a "link" from the ACMC Board.

On hearing CISTI's concerns about ILL service, a letter was sent to the Director of CISTI outlining the value to medical libraries of CISTI's ILL service, and urging that it continue at its present level.

A letter was sent to various granting agencies inquiring about their policies concerning purchase of books, journals and other information formats from research funds, and whether they consider grants-in-aid to support information programmes.

1982-83	
Chair:	Germaine Chouinard (Sherbrooke)
Secretary:	Frances Groen (McGill)
Statistics Coordinator:	David Holmes was replaced during year by Myra Owen (both from Ottawa).

Using the Matheson and Cooper report (4) as a jumping off point, the Committee discussed the future of Medical School Libraries in Canada, considering new technologies in libraries as well as in medical practice, and forecasting new curricula oriented towards informatics.

The Committee decided to prepare: 1) A Brief to CISTI on the role of its Health Sciences Resources Centre (HSRC) (by Audrey Kerr (Manitoba) and CHLA representative Barbara Greniaus) and 2) a Brief on the future of medical school libraries in Canada by Frances Groen and Germaine Chouinard in which it was recommended that medical school administrators sup-

port the health science libraries to strengthen their information technology knowledge and applications.

Because a similar bibliography was in preparation by CHLA/ABSC members, it was decided not to publish the bibliography for health services consumers.

It was agreed that Canadian statistics on medical school libraries will be compiled as long as the American Association of Health Science Library Directors continues not to record data in their publication (5) for those libraries which cannot break out their biomedical data.

1983-84

Chair:	Germaine Chouinard (Sherbrooke)
Secretary:	Frances Groen (McGill)
Statistics Coordinator:	Myra Owen (Ottawa)

The revised Terms of Reference were issued to include the Canadian Health Libraries Association President as an ex-officio, non-voting member, and to clarify that the representative from ACMC is a member of the ACMC Board.

Six recommendations were passed at the annual meeting:

- 1) Given the inexorable advance of information technology, Canadian medical school libraries should assure that users of their services are guaranteed state of the art information delivery techniques.
- 2) Although only one medical school library director reports

administratively to a health professional, all medical school librarians are accountable academically to health professionals. Medical school librarians need to work closely with health professionals within their universities to use effectively advances in medical information technology.

- 3) Cost-effective automation planning requires that attention be paid to the total institutional setting. Medical library directors need to identify the specific information requirements of health professionals and guarantee they are considered in any campus wide automation planning on their campuses.
- 4) Medical librarians need to review their role in an increasingly computer literate university and identify ways in which the library can contribute to the advancement of this computer literacy. Methods for funding new opportunities need to be explored.
- 5) Printed sources will not disappear, and medical librarians need to continue their efforts to maintain adequate collections despite the diversion of funds for automation.
- 6) Medical school librarians need to assist their staff to develop the new knowledge necessary for advanced information technology. Working with graduate schools of management or computer science as well as library science will help to develop skills necessary now and in the future.

*Leadership Role for Medical School Librarians:
a decade of activities*

(continued)

*Leadership Role for Medical
School Librarians:
a decade of activities*

(continued)

1984-85	
Chair:	Wilma Sweaney (Saskatoon)
Secretary:	Audrey Kerr (Manitoba)
Statistics Coordinator:	Myra Owen (Ottawa)

The joint brief prepared by Audrey Kerr with Barbara Greniaus (CHLA) on "The Role of the Health Sciences Resource Centre and Health Information Needs" was finalized, and presented through the APMC Board to Elmer V. Smith, Director of CISTI. A special meeting on October 6, 1985 was held with him and the CHLA Board. He accepted the recommendations. (Note: the CISTI written response was dated May 1986.) He suggested that a follow-up study of the Simon Report (6) be undertaken. An ad hoc committee made up of David Crawford (McGill), Ann Manning (Dalhousie) and Dorothy Fitzgerald (McMaster) was struck to investigate the submission of a proposal to CISTI for this project.

It was recommended that Dr. William A. Webber, the President of APMC write to the Honourable Jake Epp, Minister of Health and Welfare expressing concern over the closure of the Dept. of Health and Welfare Library in Ottawa, urging that the collection be given to a library where access, service, and a current collection will be maintained. The Chair also wrote to Miss Marianne Scott, Director of the National Library of Canada on this issue.

A survey conducted by Ann Manning (Dalhousie) found that only

libraries at Sherbrooke, Manitoba and McMaster were actively involved in computer aided instruction.

A confirming letter from Elmer V. Smith Director of CISTI was requested and received stating that the Canadian Hospital Association sponsored Infohealth/Infosante network will not change CISTI's relationship with its clients. Health science libraries could continue to receive services directly.

1983-84	
Chair:	Wilma P. Sweaney (Saskatchewan)
Secretary:	Audrey Kerr (Manitoba)
Statistics Coordinator:	Myra Owen (Ottawa)

\$6,000 was obtained from the National Research Council through the Department of Supply and Services to study the health science library resources in Canada, by surveying the 16 medical school libraries and selected teaching hospitals. This project was popularly called an update to the "Simon Report" (6). A project committee was appointed to represent the Committee and CHLA, chaired by Ann Manning. Other members were: David Crawford (McGill), Dorothy Fitzgerald (McMaster) Wilma Sweaney and Bernard Bedard (Montreal). The project committee selected Mrs. M.A. Flower as the Project Officer.

Since the statistics of the American Association of Health Science Library Directors would now be ranking libraries by groupings based on research dollars and programs served, the Canadian libraries could

no longer be included in the tables unless research funding information were available.

In response to the Chair's letter to the Department of National Health and Welfare, Bonnie Stableford was named as a representative of the Department to the Committee in lieu of the Departmental Librarian.

David Crawford (McGill) wrote to the Department of Health and Welfare to ensure that their documents are sent to each member institution.

Sylvia Chetner reported on the experiences at the University of Alberta with the National Collections Inventory Project (NCIP).

1986-87	
Chair:	Ann Manning (Dalhousie)
Secretary:	David Crawford (McGill) Statistics
Statistics Coordinator:	Myra Owen (Ottawa)

In response to a letter from the Chair, the Health Services and Promotion Information Network volunteered to provide each medical library with publications of the Department of Health and Welfare.

The members voiced scepticism of the value of NCIP in the sciences. Only a few members were involved to date. (Alberta, UBC, Dalhousie)

Serials prices had resulted in cancellations. Only Dalhousie, CISTI and Toronto had all sections of Excerpta Medica. Frances Groen (McGill) would survey all members to see what sections they have.

It was agreed that, for ILL service, Health and Welfare should charge the CISTI rate if this would result in better service.

It was agreed that the probable impact of the Federal Government's "anti-pornography" and copyright bills on the academic world should be drawn to the attention of the ACMC Board.

Maureen Wong (HSRC) reported that the MEDLINE subsets are now available in Canada. To date only 33 U.S. libraries have ordered them.

A request was denied from the Canadian Memorial Chiropractic College for "observer status", because the existing composition of the Committee was set by ACMC.

"Libraries Without Walls", by M.A. Flower (2) was issued as a result of the project initiated in 1985/86 to study the health science library resources in Canada. CISTI's response to this report was discussed and the Committee decided:

- to investigate an electronic bulletin board (assigned to Dorothy Fitzgerald, McMaster).
- to leave it up to each institution to implement an Information Management Council as appropriate.
- that recommendation 2 (7) should be amended to read "The IMC should consider the medical school library and the libraries in affiliated teaching hospitals as a decentralized unit to be funded jointly."
- to investigate with CISTI the impact of the copyright act on ILL (assigned to David Crawford and Bonnie Stableford, Health & Welfare Canada).

*Leadership Role for Medical School Librarians:
a decade of activities*

(continued)

*Leadership Role for Medical
School Librarians:
a decade of activities*

(continued)

- that a grant request from an individual interested in studying standards in health science libraries could be supported by the Committee. Frances Groen agreed to update her earlier study on granting bodies.
- that the Committee write to CISTI to support strongly the recommendation that HSRC be maintained and strengthened.

The statistics form was revised to conform to the U.S. survey mentioned above. Frances Groen agreed to ensure that the Committee will be informed of any changes to their survey as early as possible.

McGill University made a commitment to retain all medical books regardless of age and to accept material weeded by other institutions.

1987-88	
Chair:	Ann Manning (Dalhousie)
Secretary:	David Crawford (McGill)
Statistics Coordinator:	Myra Owen (Ottawa)

A six month trial of the CoSy conferencing system was conducted through July, 1988. The trial would have worked better if it had broken into subtopics sooner. All members did not participate even though it was free for the trial. Only three members continued with the system. A sub-committee of V. Ludwin (Queens), D. Fitzgerald (McMaster), C. Quinlan (Memorial) and G. Chouinard (Sherbrooke) agreed to investigate NETNORTH and other systems.

Frances Groen (McGill) on behalf of the Committee surveyed granting agencies to determine which ones provide funds for libraries. It was decided each library should concentrate on institutions that fund in their own provinces.

Myra Owen replaced David Crawford on the joint ACMC/CISTI/CHLA committee to investigate ILL concerns. Other members: Claire McKeigan (CISTI), Donna Dryden (CHLA/ABSC), Bonnie Stableford (Health & Welfare Canada).

It was agreed that the Osler Library at McGill will maintain the Committee archives.

The Canadian statistics form was selected from the U.S. survey form to save labour. Frances Groen was asked to investigate the cost of a Canadian spin-off from the U.S. statistics.

The need for standards for academic health science libraries was considered, and it was agreed the Committee would offer support to a suitable proposal for funding from CISTI/MRC or another granting agency.

This year, members began annual reporting of technological developments in each library.

1988-89	
Chair:	Dorothy Fitzgerald (McMaster)
Secretary:	Catherine Quinlan (Memorial)
Statistics Coordinator:	Myra Owen (Ottawa)

More discussion time was obtained for matters of mutual interest by adopting a new meeting format: half-day business meeting, plus 3 half-day sessions on specific topics. Sessions held were: CD technology (Catherine Quinlan - facilitator); health library networks (Lorraine Busby (Western) - facilitator); alternative solutions to space problems (Audrey Kerr (Manitoba) - facilitator).

Information on technological developments in member libraries was compared using a new survey form designed by Dorothy Fitzgerald and collated by Catherine Quinlan.

The Sub-Committee on Technological Innovation (Members: Dorothy Fitzgerald, Catherine Quinlan, Vivien Ludwin (Queens), and Germaine Chouinard (Sherbrooke)) - was charged to investigate the use of NETNORTH as a means of communication between Committee members.

An Interlibrary Loans Committee was established to investigate and identify possible solutions to concerns about document delivery and resource sharing. Members included representatives of ACMC (Catherine Quinlan) and Frances Groen (McGill)), the Canadian Health Libraries Association and the Canada Institute for Scientific and Technical Information (CISTI).

1989-90	
Chair:	Dorothy Fitzgerald (McMaster)
Secretary & Statistics Coordinator:	Lorraine Busby (Western)

At a joint meeting with the Canadian Association for Medical Education, conducted by Dorothy Fitzgerald and JoAnne Marshall (Faculty of Library and Information Science, Toronto), the role of the library in the educational process and the need for information literacy was discussed. All members agreed that meeting with another group of ACMC increases faculty awareness of library issues. Many schools were undergoing curriculum renewal and the libraries have important roles in this process.

Lorraine Busby, as statistics coordinator, will investigate the options and cost of obtaining a Canadian subset of the American statistics so that separate Canadian statistics will not be needed.

Dorothy Fitzgerald agreed to represent the committee at the CHLA Board in its discussions regarding resource sharing and document delivery.

All members who have access to BITNET now use its listserv to communicate. Members were urged to get access. In the meantime ENVOY is used to reach all members.

Concerns about the layoff at the National Research Council and their effects on CISTI were reviewed with Elmer Smith. Members were asked about the value of HSRC publications in view of budget cuts.

The joint ACMC/CHLA ILL Committee has circulated a survey and the report will soon be issued. Members Frances Groen (McGill) and Catherine Quinlan (Memorial) will be replaced by Dorothy

Leadership Role for Medical School Librarians:
a decade of activities

(continued)

*Leadership Role for Medical
School Librarians:
a decade of activities*

(continued)

Fitzgerald and Vivien Ludwin
(Queens)

It was decided that each institution will count titles held in Medline, using the 1991 list. David Crawford (McGill) will coordinate this.

Note: Representatives from the ACMC Committee sit on the Advisory Committee on the Health Sciences Resource Centre of CISTI. Since 1980 the representatives have been:

Frances Groen	1980 - 1981
Ann Nevill	1981 - 1983
Andras Kirchner	1983 - 1985
Dorothy Fitzgerald	1986
Catherine Quinlan	1986-1989
Vivien Ludwin	1990-

References

1. Heaton, G. Highlights of the History of Canadian Medical School Librarians. *Bibl Med Can* 1983; 4(4): 82-84.
2. Flower, M.A. Libraries Without Walls: Blueprint for the Future; Report of a Survey of Health Science Library Collections and Services in Canada. A Joint Project of the Special Resource Committee on Medical School Libraries of the Association of Canadian Medical Colleges, and the Canadian Health Libraries Association. Association of Canadian Medical Colleges, Canadian Health Libraries Association, 1987.
3. The Future of the National Library of Canada. Ottawa: The National Library, 1980. (unpublished).
4. Matheson, N.W. and J.A.D. Cooper. Academic Information in the Academic Health Sciences Center: Roles for the Library in Information Management. *J Med Educ Sup* 1982; Oct pt 2.
5. Association of Academic Health Sciences Library Directors. Annual Statistics of Medical School Libraries in the United States and Canada. Houston: Houston Academy of Medicine-Texas Medical Center Library.
6. Simon, B.V. Library Support of Medical Education and Research in Canada. Ottawa: Association of Canadian Medical Colleges, 1963.
7. Heaton, G. Highlights of the History of Canadian Medical School Librarians. *Bibl Med Can* 1983; 4(4): 83.

Criticism of workload measurement systems usually stems from their failure to capture the complexity of the work involved and from their non-comparability across settings. These drawbacks were kept in the foreground when the CHLA/ABSC Task Force on the CHA/MIS Guidelines was designing the workload measurement system process for its member libraries. The subsequent publication of **Workload Measurement Systems : a guide for Libraries** in 1992 laid the groundwork for collecting data on library workload measures. In addition, a highly successful course was run last year in Winnipeg to introduce the system to CHLA/ABSC members.

The role of the CHLA/ABSC WMS Liaison is to coordinate and manage the results of workload measurement studies undertaken by the membership and to keep both the membership and the CHLA/ABSC Board informed of developments in the area. This position has a two year term. The incumbent will recommend a successor for the Board's approval.

1. The CHLA/ABSC WMS Liaison will coordinate national reporting of workload measurement activities by:

- 1.1 maintaining close contact with the Secretariat and participating libraries;
- 1.2 perusing forms received for inconsistencies or errors in recording;
- 1.3 obtaining information on the services, staffing and size of all reporting libraries;

1.4 ensuring that data received are filed and analyzed when numbers are sufficient.

2. The CHLA/ABSC WMS Liaison will maintain liaison with the CHLA/ABSC membership by:

2.1 keeping the membership abreast of new information on hospital productivity and workload measurement literature by publishing in *Bibliotheca Medica Canadiana* (BMC);

2.2 encouraging the membership to purchase the **Guide** and submit results to the Secretariat;

2.3 serving as an "expert" and consultant to members who are initiating workload measurement trials;

2.4 reporting to the membership on activities and/or results of data analysis in each issue of BMC;

2.5 presenting an oral report at the Annual General Meeting.

3. The CHLA/ABSC WMS Liaison will maintain liaison with the CHLA/ABSC Board by:

3.1 submitting written reports to the Board at the Fall and Winter Meetings and just prior to the Annual General Meeting;

3.2 transmitting the concerns of CHLA/ABSC members regarding workload measurement systems and the reporting process to the Board;

3.3 monitoring costs and submitting an annual budget for Board approval;

3.4 making recommendations to the Board about ongoing development and implementation of a

Workload Measurement Systems (WMS) : Where is CHLA/ABSC and Where are You?

Susan E. Hendricks

CHLA/ABSC WMS Liaison 1993/94

Tel: (416) 576-8711 x 3334

Fax: (416) 433-2794

*Workload Measurement Systems
(WMS) : Where is CHLA/ABSC
and Where are You?*

(continued)

- national workload measurement system;
- 3.5 recommending a slate of replacement candidates for the position for Board approval.
 4. The CHLA/ABSC WMS Liaison will cooperate with other associations and groups interested in workload measurement systems by:
 - 4.1 maintaining the liaison established by the Task Force with the MIS Project;
 - 4.2 establishing links with other hospital productivity groups and/or library associations as required.

Please look at these Terms of Reference in terms of your own interests and needs to determine how the Liaison may assist you in implementing the system suggested in the **Guide**. Right now, the CHLA/ABSC WMS Liaison is very lonely since no reports have been received from participating libraries! Have you purchased a copy of the **Guide**? If not, you

might consider it. Ordering information is printed elsewhere in this issue of BMC. If you have experienced difficulties in using the **Guide**, please indicate this to the Liaison. Until we hear from you, we cannot determine how useful or practical the **Guide** has been to our members.

The next issue of BMC will include a questionnaire on the services, staffing and size of the libraries within CHLA/ABSC and their degrees of success in implementing our workload measurement system. In the meantime, please send in your preliminary WMS results to the Secretariat. I look forward to providing you with a summary of the results. ■

Secretariat address:

CHLA/ABSC
P.O. Box 94038
3332 Yonge Street
Toronto, Ontario
M4N 3R1

Since I reported to you in *Bibliotheca Medica Canadiana* 14(2) 1992 and at the CHLA/ABSC Annual Conference in Winnipeg in 1992, I have responded to the CCHFA proposed 1994 *Acute Care: Large Community and Teaching Hospitals* document. I thank CHLA/ABSC chapter presidents and individuals who replied to my requests for comments.

There has been a generic revision to the document to include three sections rather than five. They are **I. Quality Management**, **II. Resources Management** and **III. Planning and Organization**. The new document eliminates some of the redundancies of the 1992 document. The changes also reflect the emphasis of the standards, which is to promote quality service. Therefore, this standard is first, and the structures and processes standards, **II** and **III**, follow. In streamlining the standards, CCHFA collapsed five sections into three, with resulting anomalies that had to be corrected.

Please also keep in mind that the 1992 Mental Health and Rehabilitation documents were revised after the 1992 Acute Care documents. Hence, some standards in the proposed 1994 Acute Care document that differed from the 1992 Acute Care standards were actually the same as the 1992 Mental Health and Rehabilitation standards.

After receiving your feedback, the main changes that I requested were:

Under Standard **I.2** on possible principal functions for library services, I requested the following additions:

- *provision of consumer health/-patient education collections and services*
- *end-user teaching and support, e.g. online search systems, electronic personal file management, CDROM search services*

In Standard **II.1.1** on mechanisms to determine staffing, I requested the inclusion of "facility-wide needs assessment".

In Standard **II.6.2** on staff development activities, I requested this addition:

The staff development activities address current policies and procedures *and standards of service delivery*, as well as needs identified through:

In Standard **II.12** on policies and procedures for staff safety, I requested the reinstatement of "lighting and ventilation".

Standard **III.8** is about the communication of policies and procedures. Previously, **III.10** was the standard related to communicating changes to staff and **III.10.1** was a standard that specified that policies and procedures were communicated to patients, and families, and this was omitted in the present **III.8**.

For those hospitals in which patient education and consumer health collections and services are important components, it is necessary to include other people than health care facility staff as recipients of communication regarding policies and procedures.

I suggested that the header be changed to:

Report of the CHLA/ABSC - CCHFA Liaison on Health Facilities Library Standards

Janet Joyce

Rhodes Chalke Library
Royal Ottawa
Health Care Group
1145 Carling Avenue
Ottawa, Ontario K1Z 7K4

Tel: (613) 722-6521 x6832
Fax: (613) 722-5048
ENVOY: ILL.OORO

- *provision of information and reference services*

Report of the CHLA/ABSC -
CCHFA Liaison on Health
Facilities Library Standards

(continued)

Standard **III.8** New and revised policies and procedures are communicated to staff, *and if appropriate patients and families*, and are available for reference.

or,

New and revised policies and procedures are communicated to *users of the service* and are available for reference.

Mechanisms for communicating policies and procedures *to users of the service* may include:

I suggested these reinstatements:

- *patient bulletins*
/newsletters /handbooks
- *patient /family /staff*
conference

Regarding the controversial Standard **III.12**, **III.12.1** on direction of the service (previously **II.7**, **II.7.1**, (Readers are referred to *BMC* 13(3) and 14(1) for background information) I proposed the following:

For *Acute Care: Large Community and Teaching Hospitals*:

III.12.1 The qualifications of the director of the service include: (instead of the existing "the preferred qualifications")

- Master's degree in library science or Master's degree in library and information science, i.e. instead of the existing "Master's degree in library science".
- management education *and/or experience (remain the same)*

For *Acute Care: Small Community Hospitals and Long Term Care*, I proposed the following:

III.12.1 As above

III.12.1.1 In small facilities or those with no teaching affiliations or research programs, in the absence of a qualified librarian, library services are provided on a full or part-time basis by an individual (preferably a library technician) who has regular consultation with a qualified librarian.

You will recall that when Mental Health and Rehabilitation standards were revised in 1992, CCHFA, under protest from CHLA/ABSC, altered the "in small facilities" clause to drastically alter the intent of the standard. The changes I proposed seek to improve the standards.

Once again, I expressed concern regarding the inclusion of library services in the standards of Education Services and Human Resources services. In Education Services **II.14**, "access to library services" is included as part of the formal information systems needed to support the achievement of goals and objectives of this service. I argued that this implies that Education Services is a filter for library services and that "access to library services" should be included in all clinical and non-clinical service standards.

Once again, I argued that the inclusion of library services as a possible function of Human Resources Services sets up a hierarchical relationship and I questioned the necessity or advisability of CCHFA providing these relationships, as this is the proper role and responsibility of individual institutions depending on their needs.

CCHFA had requested that all national organizations that had formerly expressed an interest in seeing the standards of other national organizations should now consult with these organizations and arrive at one collated response.

Essentially, I responded that this kind of ad hoc consultation would not be fruitful given that standards are organized in terms of services and that if standards addressed functions or structural components, such as information management, as is the case with the JCAHO (Joint Commission on Accreditation of Healthcare Organizations), *Accreditation Manual to Hospitals*, then consultation would be welcome. I noted that neither the Canadian Association of Health Care Human Resources Management or the Canadian Health Care Educators had contacted me.

When I discussed the lack of feedback regarding my response to the proposed 1994 *Acute Care/Long Term Care* document with Marilyn Colton, Director, Standard Review and Development, she told me that the CCHFA Standards Advisory Board would be meeting at the end of the first week in March to discuss future directions. CCHFA may continue to provide service standards, or it may organize standards around functions, as JCAHO has. So, the 1994 proposed standards may not end up printed as discussed, and we may be starting the process of consultation again.

A number of you have asked about a two-page document called *Library Functions, Acute Care Small Hospitals 1994*. The header says it is "for completion when the service is not

formally organized and/or is a single-person service".

I was completely unaware that such a document existed until it was brought to my attention by you. I have called CCHFA to protest that input was not requested and that the document bears little resemblance to the document for *Acute Care: Large Community and Teaching Hospitals*. Ms. Colton stated that the document should have been sent to me to review and has apologized for the oversight. I understand from her that the *Acute Care: Small Hospitals* document contains both the Library Services standards from *Acute Care: Large* and the Library Function standards, and the facility can choose which it wishes to use.

I advised Ms. Colton, given that the *Acute Care: Small Hospitals* document does not reflect membership wishes regarding direction of service as reflected in the "in small facilities" clause, I would be writing to her to change the CHLA/ABSC response to direction of service in the *Acute Care: Large* document. I will request simply that the direction of the service be provided by a person with a Master's degree in Library Science or Library and Information Science, with management education and/or experience. I will request deletion of the "in small facilities" clause entirely.

I have recently received notification that the 8th National Health Organizations meeting will take place on April 5, 1993 in Ottawa. With that invitation also came a draft document entitled *Small Health Facilities: Draft Standards for Field Testing, 1993*.

*Report of the CHLA/ABSC -
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(continued)

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Facilities Library Standards

(continued)

According to the preface, the criteria established for use of the document include:

- *number of beds: 70 or less (sic) acute care beds with or without long term care beds*
- *services provided: mainly primary care with limited secondary care*
- *focus: community oriented with ongoing liaison and linkages with the population served and related community interest groups*
- *simplicity of the organizational structure e.g. few management staff; may be a small number of physicians (in some cases, only one physician)*
- *governance may be independent or part of a regional complex*

The preface states that, "these standards are being field tested in 1993 and the criteria may be revisited subsequent to the 1993 field testing".

According to Ms. Colton, CCHFA organized a national Steering Committee consisting of physicians, nurses, and administrators, who represent the surveyor group. Linkages were made with the provincial hospital associations to provide input. National organizations were not consulted.

In this document, library has been put under **I. Management, II. Resources Management**. By contrast, Patient Care Support includes clinical records, diagnostic imaging education, laboratory, nutrition and food, pastoral care, pharmacy,

rehabilitation, respiratory therapy, and therapeutic recreation.

Library is included with: reception and communications (internal and external), financial management, physical resources/materials management, human resources, and ambulance services.

Two standards are allotted to library and they are as follows:

12. Staff, physicians, and patients / residents / families have access to the appropriate reference material.
13. There is a designated individual / committee responsible for the library of reference materials.
- 13.1 The authority and responsibilities of the individual / committee are clearly defined.
- 13.2 There is a provision for consultation with a qualified librarian, as appropriate.

The Education Function includes the following:

6. There are current material resources which contribute to staff education.

Such resources may include:

- *professional journals*
- *texts*
- *publications*
- *newsletters*
- *audiovisual aids*
- *teleconferencing*

Ms. Colton has informed me that there will be a briefing on this draft and discussion of the process for consultation with the national organizations after our meeting in April.

On November 24 and 25, 1992, I attended the CCHFA Invitational Consensus Conference in Ottawa called "Partnerships for the Management of Quality". This conference was held instead of the fall CCHFA national organizations meeting. The goal of the conference was to serve as a catalyst for the development of partnerships in Canada's healthcare system toward a comprehensive and systematic approach to the management of quality. Members of the national organizations (providers) were present, as well as representatives from government and consumers.

Please contact me if you have any questions or comments. ■

*Report of the CHLA/ABSC -
CCHFA Liaison on Health
Facilities Library Standards*

(continued)

Telemedicine Schedule Spring 1993

May 14, 1993

***One library several libraries : developing
a shared library service***

Presenters: Susan Hendricks, Silvia Spice
Oshawa General Hospital
Oshawa, Ontario

June 4, 1993

Introduction to Internet

Presenter: Elaine Boychuk
Killam Library
Dalhousie University

June 25, 1993

***The fairy tale comes true : an inhouse
integrated system***

Presenter: Judy Barnes
Sarnia General Hospital
Sarnia, Ontario

Upcoming fact sheets will be:

Care and feeding of the CDROM player

Checklist of resources for adaptive technology in the library

I am still trolling for topics and likely presenters of Telemedicine programs in the next term, so please don't hesitate to contact me with ideas or names.

Patrick Ellis
CHLA/ABSC CE Coordinator
W.K. Kellogg Health Sciences Library
Tupper Building
Dalhousie University
Halifax, N.S.
B3H 4H7

The Canadian Health Libraries Association's 17th Annual Conference on June 12 - June 16, 1993, takes place in Banff, Alberta, amidst the splendour of the Canadian Rockies, in Canada's first national park.

Call for posters:

The Canadian Health Libraries Association / Association des bibliothèques de la santé du Canada 1993 Program Committee invites you to share innovations, special projects, or recent activities in your library with your colleagues through a poster presentation at the conference.

Poster presenters must be Conference Registrants.

For further information contact:

Barbara Hatt, Conference Co-Chair
Hospital Library
Alberta Children's Hospital
1820 Richmond Road, S.W.
Calgary, Alberta
T2T 5C7

Tel: (403) 229-7077
Fax: (403) 229-7221
Envoy: ILL.ACACH

Call for Posters

CHLA/ABSC 17th Annual Conference "Peak Performance"

June 12 - 16, 1993
Banff, Alberta

The Windsor Area Health Librarians Association (WAHLA) met with the London Area Health Libraries Association (LAHLA) in the Fall, to consider mutual resources, co-operation and joint ventures.

As the first event, the two groups are sponsoring a workshop:

Workload Measurement with Jan Greenwood

Chatham, Ontario
Friday, April 23, 1993.

For further information regarding the workshop please contact:

Linda Voelker
Allyn and Betty Taylor Library
University of Western Ontario
London, Ontario
N6A 5B7

Tel: (519) 661-2111 x6383
Fax: (519) 661-3880
Envoy: ILL.SCI.UWO

Hopefully, this is just the beginning of many shared events.

Anna Henshaw
WAHLA Correspondent
Grace Hospital
339 Crawford Avenue
Windsor, Ontario
N9A 5C6

Tel: (519) 255-2245
Fax: (519) 255-2458

Windsor Area Health Librarians Association

Reception for Canadian Delegates Attending the Medical Library Association 1993 Conference in Chicago

As your association representative to MLA, one of my pleasant duties is to facilitate a reception for Canadian delegates attending the Conference. This will most likely take the form of a pre-dinner get-together on the Monday or Tuesday evening, May 17 or May 18).

The date, time and location have yet to be determined but will be clearly posted at the registration desk. It should be noted that this reception will be **in addition to** the International Member's Reception, which is scheduled for Sunday May 16, 1993 from 1700 - 1800.

Canadian delegates are invited to contact me at Palmer House, 726-7500, where I will be registered, to confirm arrangements for the reception.

During the conference, I would also be pleased to discuss with members any aspect of CHLA/ABSC business.

Bev Brown

CHLA/ABSC Vice-President

CHLA/ABSC Representative to the Medical Library Association

Continuing education, May 14-16, 1993

TQM Part II • Navigating the Internet • Information Malpractice • Concepts in Database Design • Advanced Grateful Med • Searching the Genome database • Principles and Factors in High Achievement • The Library's Contribution to Quality • Introduction to Health Services Research • Planning Library Facilities • Health Professionals and Information • Bibliographic Instruction Programs ■

Continuing Education Courses

Four CE courses relating to the theme **Focus on the Customer** are scheduled for UNYOC '93.

Wednesday, October 6, 1993

- 1) **Empowering Your Library:
Running a Customer-Focused Service Business**
Instructors: *Jane Dysart, Rebecca Jones*

Librarians need a strong customer base that clearly understands and supports the value of the information services they provide. The first step towards building this base is for the library to focus on the customer. The workshop will equip information professionals with the tools and tactics used in other successful service businesses.

- 2) **Grateful Med Workshop
Grateful Med Train the Trainers Workshop**
Instructor: *Diane Pammett (CISTI staff)*

Two separate half day workshops on Grateful Med: the first for users and the second for librarians who want to train others how to use Grateful Med. The first workshop is recommended for anyone who wants to take the trainers workshop, but who has not had previous experience with Grateful Med.

Saturday, October 9, 1993

- 1) **The Library's Contribution to Quality :
Making Effective Library Presentations**
Instructors: *Bernie Todd Smith, helen-ann brown (sic)*

A workshop on presentation skills that uses the slide set available from the Medical Library Association as a basis for designing and practising different presentations on the library that are suitable for administrators, boards and clinical groups. Participants will have an opportunity to design and practise their own presentations.

- 2) **Building Quality through Benchmarking**
Instructors: *Holly Shipp Buchanan, Joanne Marshall*

Benchmarking is a technique that provides a common measuring stick to evaluate process performance and allows comparison to the best operational practices in other library and industry settings. The workshop will focus on the planning, gathering and analysis of benchmarking data. Participants should have a basic knowledge of TQM and CQI prior to attending the workshop.

(This is a follow-up to Holly's earlier TQM introductory workshop that has been offered in the Toronto area previously).

Contact: Elizabeth Reid
R.C. Laird Health Sciences Library
The Toronto Hospital, Toronto Western Division
399 Bathurst Street
Toronto, Ontario M5T 2S8

TEL: (416) 369-5750;
FAX: (416) 369-5326

UNYOC '93 Conference "Focus on the Customer"

October 6-9, 1993
(Wednesday-Saturday)

Toronto Hilton Hotel,
145 Richmond Street
West at
University Avenue,
Toronto, Ontario

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25 Mauchly, Suite 305
Irvine, CA 92718
USA

People in the News

Myra Owen retired on December 31, 1992, after 12 years at the University of Ottawa as director of the former Nursing Library and the Health Sciences Library. Myra spent 45 years in the health care field, having worked as a nurse before recycling as a librarian. During her tenure she gave the Health Sciences Library dynamic leadership. Her special sense of humour will be missed.

Myra Owen a pris sa retraite le 31 décembre 1992, après 12 ans de service à l'Université d'Ottawa comme directrice de l'ancienne bibliothèque des Sciences infirmières, puis de la Bibliothèque des Sciences de la santé. Myra a oeuvré durant 45 ans dans le domaine de la santé, ayant exercé la profession d'infirmière avant d'amorcer sa seconde carrière comme bibliothécaire. Tout au long de son mandat, elle a assuré à la bibliothèque une gestion dynamique. Son sens de l'humour très spécial nous manquera.

Submitted by: Michelle Leblanc

PROMOTIONAL MATERIALS

We have answers / Un rendez-vous avec l'information

T-Shirts	Medium, Large, Extra Large	
	Yellow, Black, White	\$ 15.00
Posters		\$ 5.00
Brochures		\$ 0.70

PUBLICATIONS

Standards for Canadian health care facility libraries: qualitative and quantitative guidelines for assessment, 1989

CHLA/ABSC Task Force on Hospital Library Standards

This report comprises the first substantial revision to standards for health libraries in Canada in a decade. The report took two years to complete and relies heavily upon data obtained during that period from health libraries throughout Canada; as such it reflected current practices.

The report presents descriptive standards for libraries. To assist in the interpretation of these descriptive standards are qualitative and quantitative guidelines, as well as an assessment form which can serve as an overall audit for health libraries. Also included are an interpretation for small health

CHLA/ABSC Publications and Merchandise

libraries, sample terms of reference for library committees, detailed descriptions of the tasks and responsibilities of library staff at various levels, a selection of simple audits and a lengthy guide to physical planning.

Workload measurement systems : a guide for libraries, 1992

CHLA/ABSC Task Force on the CHA/MIS Guidelines

This publication marks the culmination of three years' work by the Task Force entrusted with the task of laying the groundwork for developing national guidelines for collecting data on library workload measures. It also constitutes the course guide for a workshop accredited by CHLA/ABSC and the Medical Library Association (MLA).

Readers are given a thorough grounding in the basic terminology and salient features of workload measurement systems (WMS). The Guide contains detailed instructions on how to design and implement WMS programs to meet the disparate needs of libraries of various types and sizes. The value of WMS as a departmental management

tool to assist in performance and budget monitoring is stressed.

Included in the Guide are sample data collection and assessment forms, a conceptual model delineating primary and secondary library functions and an annotated bibliography.

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Call for Nominations for CHLA/ABSC Honours and Awards

CHLA/ABSC Tenth Anniversary Commemorative Award

The Tenth Anniversary Award recognizes that one of the most tangible means whereby the mission of CHLA/ABSC is accomplished is through the activities of its Chapters. The Award, therefore, is available to Chapters in order to further the CHLA/ABSC mission. It is in the amount of \$500.00 and is offered annually.

Eligibility and application criteria:

1. All chapters in good standing are eligible to apply.
2. The President of the Chapter must submit a detailed summary of the special activity on which the judgement is to be based. The submission must be co-

signed by any other member of the executive. This submission is distinct from any annual report submitted to the Board.

3. The activity which forms the basis upon which a Chapter applies for an award may take place in a given year or be represented by the efforts of several years.

Submissions must be received by May 1, 1993. Please mail to:

Jennifer Bayne
CHLA/ABSC President
Fudger Medical Library
Toronto General Hospital
Bell Wing, Floor 9
585 University Avenue
Toronto, Ontario, M5G 2C4

CHLA/ABSC Student Paper Prize

Eligibility

The contest is open to all students in or recently graduated from a library or information sciences program, a library techniques program or a program in a related faculty. Registered students may be full or part-time. Articles submitted must be written while the student is enrolled in a program of study, or within one year of graduation.

A statement from a faculty member verifying that the article was written in accordance with the above requirements must accompany each paper.

Multiple-author papers are eligible but in the event that such a paper is selected only one prize will be awarded, divided evenly amongst all authors.

The prize winner must be willing to have the paper published in *Bibliotheca Medica Canadiana*, the official journal of CHLA/ABSC.

Prize

The author of the winning paper will receive \$150.00 in cash and free registration for the CHLA/ABSC Annual Conference to be held June 12 - June 16, 1993 in Banff, Alberta. The winning paper will be published in *Bibliotheca Medica Canadiana*.

Content and format

The paper should provide an in-depth analysis of a topic in health sciences librarianship or information science that is of interest to CHLA/ABSC members. The paper should not exceed twenty double-spaced typed pages and must not

have been previously published. All references should be given in the Vancouver style; see Canadian Medical Association Journal 1985; 132:401-405. Contributions should be submitted on disk, preferably in WordPerfect 5.1 format.

All entries will be blind-reviewed. Three copies of the manuscript should be submitted together with a single cover sheet containing the full title of the article and for each author, name, a brief bibliographic sketch, degree program and institution, home address and telephone number.

Entries should be mailed to:

Student Paper Prize
CHLA/ABSC
P.O. Box 94038
3332 Yonge Street
Toronto, Ontario, M4N 3R1

Submissions must be postmarked no later than **April 30, 1993**.

Judging

The panel of judges comprises the CHLA/ABSC Continuing Education Coordinator, the Editor of Bibliotheca Medica Canadiana, and one other person appointed by the CHLA/ABSC President. The judges will read and evaluate all entries for style and readability, originality and suitability for publication. The decision of the judges is final. If, in the opinion of the judges no article submitted satisfies these criteria, the judges reserve the right not to declare a winner.

Announcement of the award will be made at the Annual General Meeting in Banff, Alberta on June 15, 1993. The winner will be contacted prior to that date. ■

*Call for Nominations for
CHLA/ABSC Honours and Awards*

(continued)

Prix commémorant le dixième anniversaire de l'ABSC/CHLA

Le prix commémorant le dixième anniversaire de l'ABSC/CHLA permet de mettre en évidence le rôle primordial que jouent les chapitres dans l'accomplissement de la mission de l'association. C'est donc pour servir cette mission que ce prix s'adresse aux différents chapitres de l'ABSC/CHLA. Le prix, décerné chaque année, est d'un montant de 500\$.

Admissibilité et conditions requises:

1. Tout chapitre bien établi peut se proposer.
2. Le président ou la présidente du chapitre intéressé doit soumettre, au plus tard un mois avant l'assemblée générale annuelle, un sommaire détaillé de l'activité qui pourrait lui valoir ce prix. Ce document doit aussi être signé par un autre membre de l'exécutif du chapitre et se

distingue de tout rapport annuel soumis au conseil d'administration.

3. L'activité qui vaudrait au chapitre de recevoir le prix peut correspondre au travail d'une année donnée ou être le résultat d'efforts effectués durant plusieurs années.

Les mises en candidature doivent être soumises par écrit, avant le 1^{er} mai 1993, à:

Jennifer Bayne
présidente de l'ABSC/CHLA
Fudger Medical Library
Toronto General Hospital
Bell Wing, Floor 9
585 University Avenue
Toronto, Ontario, M5G 2C4

**Appel pour
les
nominations
pour les
honneurs et
les prix de
l'ABSC/CHLA**

Prix du meilleur article d'étudiant

Admissibilité

Le concours est ouvert à toute personne poursuivant des études ou récemment diplômée en bibliothéconomie, en informatique, en techniques de documentation et autres programmes connexes. Les étudiants peuvent être inscrits à plein temps ou à temps partiel; les diplômés devraient avoir complété leurs études au plus tôt un an avant la date de clôture du concours, soit le **31 mars 1993**. Les articles soumis doivent avoir été rédigés alors que le concurrent était encore aux études, ou au cours de la première année suivant l'obtention du diplôme.

Chaque article doit être accompagné d'une attestation d'un professeur, comme quoi il a été rédigé conformément aux directives ci-dessus. Les articles écrits en collaboration sont admissibles; cependant, si un tel article était choisi, un seul prix serait attribué et partagé également entre les coauteurs.

Le gagnant doit accepter que son article soit publié dans **Bibliotheca Medica Canadiana (BMC)**, le bulletin officiel de l'ABSC/CHLA.

Prix

Un montant de 150\$ et une inscription gratuite au congrès annuel 1993

*Appel pour les nominations pour
les honneurs et les prix de
l'ABSC/CHLA*

(continued)

de l'ABSC/CHLA, qui aura lieu du 12 au 16 juin prochain à Banff, Alberta. L'article gagnant sera publié dans BMC.

Contenu et format

L'article devrait fournir une analyse en profondeur d'un sujet d'actualité en bibliothéconomie ou en informatique, susceptible d'intéresser les membres de l'ABSC/CHLA. L'article devrait être remis sur disquette, on préfère le format Word-Perfect 5.1. L'article ne devrait pas dépasser 20 pages dactylographiées à double interligne, et doit être inédit. Toutes les références doivent être présentes dans le style Vancouver; voir le *Journal de l'Association médicale canadienne* 1985;132:401-5.

Toutes les participations seront jugées impartialement. L'auteur doit soumettre trois copies du manuscrit avec une page de présentation comprenant les informations suivantes: le titre complet de l'article; le nom de l'auteur (et des coauteurs, s'il y a lieu), ainsi que de brèves notices biographiques; le programme et l'institution auxquels l'auteur (les auteurs) se rattache(nt); les adresses et les numéros de téléphone. On doit faire parvenir le tout à:

Concours du meilleur
article d'étudiant
ABSC/CHLA
C.P. 94038
3332 Yonge Street
Toronto, Ontario
M4P 2G9

Les mises en candidature doivent être postées au plus tard, le **31 Mars 1993.**

Jugement

Un panel composé du coordonnateur, perfectionnement, de l'ABSC/CHLA, de l'éditeur du BMC et d'une autre personne nommée par le président de l'ABSC/CHLA, lira et évaluera chaque participation quant à l'originalité, la valeur et la pertinence de l'information présentée, l'uniformité et la précision, le style, la lisibilité et la pertinence à la publication. La décision des juges sera irrévocable. Si aucun article ne satisfait à ces exigences, les juges se réservent le droit de ne pas choisir de gagnant.

L'annonce du prix sera faite à l'assemblée générale annuelle, le 15 juin 1992, à Banff. On communiquera avec le gagnant cette date.

Bibliotheca Medica Canadiana Advertising Rates

For full advertising policy see BMC 14(3):160.

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Bibliotheca Medica Canadiana (BMC) only accepts advertising for products and services relevant to the professional interests of its readers.

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INTERNET:
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BEVERLY BROWN*CHLA/ABSC Vice-President/President**Elect* (1992-1994)

Medical Library
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FAX: (204) 772-0094
ENVOY: ILL.MWM
INTERNET:
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ADA DUCAS*CHLA/ABSC Past President* (1990 - 93)

Head, Science Library
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Tel: (204) 474-8302
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aducas@ccm.umanitoba.ca

GEORGE BECKETT*CHLA/ABSC Treasurer* (1991 - 93)

Health Sciences Library

Memorial University of Newfoundland
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Tel: (709) 737-6670
FAX: (709) 737-6400
ENVOY: NFSMM.ILL
INTERNET:
georger@kean.uccs.mun.ca

CANDACE THACKER*CHLA/ABSC Secretary* (1992 - 94)

Library
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Hamilton Civic Hospitals
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PATRICK ELLIS*CHLA/ABSC CE Coordinator* (1992 - 94)

Interlibrary Loan Department
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FAX: (519) 336-1293
ENVOY: JILL.FAUBERT

PETER SCHOENBERG*Editor*

Library Services
Glenrose Rehabilitation Centre
10230 - 111th Ave
EDMONTON, Alberta T5G 0B7

Tel: (403) 471-2262 x 2599
FAX: (403) 471-7976
ENVOY: GLENROSE.REHAB
INTERNET:
pschoenb@vm.uccs.ualberta.ca

SANDRA SHORES*Assistant Editor*

John W. Scott Health Sciences Library
2K3.28 WC Mackenzie Centre
University of Alberta
EDMONTON, Alberta T6G 2R7

Tel: (403) 492-7933
Fax: (403) 492-6960
ENVOY: AEU.JWSCOTT
INTERNET:
sshores@vm.uccs.ualberta.ca

CHLA/ABSC Board of Directors

BMC Staff

BMC

Correspondents

Judy MacIntosh

Central Ontario Health Libraries Assoc.
Peterborough Civic Hospital
Peterborough

Tel: (705) 876-5005
FAX: (705) 743-0188

Rebecca Raworth

Health Libraries Assoc. of B.C.
British Columbia Courthouse
Library Society
Vancouver

Tel: (604) 660-2910
FAX: (604) 660-2821
ENVOY: BCCLS

Barbara Carr

Kingston Area Health Libraries Assoc.
St. Lawrence College, Kingston

Tel: (613) 544-5400
FAX: (613) 545-3920
ENVOY: ILL.OKSL

Mai Why

London Area Health Libraries Assoc.
London Psychiatric Hospital, London

Tel: (519) 455-5110 x 2167
FAX: (519) 455-9986
ENVOY: ILL.OLPH

Laurie Blanchard

Manitoba Health Libraries Assoc.
J.W. Crane Memorial Library
Winnipeg

Tel: (204) 831-2154
FAX: (204) 888-1805

Anne Kilfoil

Maritimes Health Libraries Assoc.
Saint John Regional Hospital
Saint John, N.B.

Tel: (506) 648-6763
FAX: (506) 648-6060
ENVOY: SJRH.LIB

Catherine Lawton

Newfoundland and Labrador Health
Libraries Assoc.
St. Clare's Mercy Hospital
St. John's, Newfoundland

Tel: (709) 778-3111
FAX: (709) 738-0080

Joanne Lavkulich

Northern Alberta Health Libraries
Assoc.
Alberta Occupational Health and
Safety Library / Alberta Health Library
Edmonton

Tel: (403) 427-3530
FAX: (403) 422-3091
ENVOY: AECOH.ILL

Sylvia Wright

Northwestern Ont. Health Libraries
Assoc.
St. Joseph's General Hospital,
Thunder Bay

Tel: (807) 343-2431 x 2520
FAX: (807) 345-4994

Terry Bouchard-DeVenney

Saskatchewan Health Libraries Assoc.
Regina General Hospital

Tel: (306) 359-4514
FAX: (306) 359-4723
ENVOY: ILL.SRG

Jean Finley

Southern Alberta Health Libraries
Assoc.
Long Term Care Resource Centre
Calgary

Tel: (403) 267-2942
FAX: (403) 267-2968
ENVOY: ILL.ACLTC

Madeline Grant

Toronto Health Libraries Assoc.
Staff Library, Baycrest Centre for
Geriatric Care
North York, Ontario

Tel: (416) 789-5131 x2353
Fax: (416) 785-2378

Dee Sprung

Wellington/Waterloo/Dufferin Health
Library Network
Freeport Hospital, Kitchener

Tel: (519) 893-2710 x7174
FAX: (519) 893-2625

Anna Henshaw

Windsor Area Health Libraries Assoc.
Salvation Army Grace Hospital,
Windsor

Tel: (519) 255-2245
FAX: (519) 255-2458
ENVOY: A.HENSHAW

Manuscripts

The editors of **Bibliotheca Medica Canadiana** welcome any manuscripts or other information pertaining to the broad area of health sciences librarianship, particularly as it relates to Canada.

Contributors should consult recent issues for examples of the type of material and general style sought by the editors. Queries to the editors are welcome. Submissions in English or French are welcome.

Contributions should be submitted **on disk, preferably in Word-Perfect 5.1 format, and also printed in duplicate** and the author should retain one copy. Contributions should be **double-spaced** and **should not exceed ten pages or 3500 words**. Pages should be numbered consecutively in arabic numerals in the top right-hand corner. Articles may be submitted in French or in English but will not be translated by the editors or their associates. Style of writing should conform to acceptable English usage and syntax; slang, jargon, obscure acronyms and/or abbreviations should be avoided. Spelling shall conform to that of the **Oxford English Dictionary**; exceptions shall be at the discretion of the editors.

All contributions should be accompanied by a covering letter which should include the author's (typed) name, title and affiliations, as well as any other background information that the contributor feels might be useful to the editorial process.

References

All references should be given in the Vancouver style; see **Canadian Medical Association Journal** 1985;132:401-5. Contributors are responsible for the accuracy of their references. Personal communications are not acceptable as references. References to unpublished works shall be given only if obtainable from an address submitted by the contributor.

Illustrations

Any illustrations or tables submitted should be black and white copy camera-ready for print. Illustrations and tables should be clearly identified in arabic numerals and should be well-referenced in the text. Illustrations and tables should include appropriate titles. ■

Information for Contributors

Avertissement aux auteurs

Manuscrits

Les rédacteurs de la *Bibliotheca Medica Canadiana* sont à la recherche de manuscrits ou d'autres renseignements portant sur le vaste domaine de la bibliothéconomie dans le contexte des sciences de la santé. Nous recherchons tout particulièrement des articles relatifs à la situation au Canada et à des thèmes d'actualité.

Si vous désirez nous soumettre un manuscrit, vous êtes prié de consulter quelques livraisons récentes de la revue pour vous familiariser avec le contenu et le style général recherchés par la rédaction. La rédaction recevra avec plaisir vos questions et observations. Les articles en anglais ou en français sont bienvenus.

Les articles devraient être remis sur disquette, on préfère le format WordPerfect 5.1, ils devraient aussi être imprimés en deux exemplaires et l'auteur devrait garder une copie. Les articles devraient être **imprimés à double interligne et ne pas dépasser dix pages ou 3500 mots**. Veuillez numéroter les pages consécutivement en chiffres arabes en haut de la page à droite. Les articles peuvent être remis en français ou en anglais, mais ils ne seront pas traduits par la rédaction ni par les associés de la rédaction. Le style d'expression écrite se conformera à l'usage et à la syntaxe acceptables du français; il est préférable d'éviter l'argot, les sigles et autres abréviations obscures. L'orthographe se conformera à celle du **Robert**; les exceptions à cette règle seront à la discrétion de la rédaction.

Tout article devrait s'accompagner d'une lettre explicative fournissant les informations suivantes: nom de l'auteur (dactylographié), son titre et lieu de travail, ainsi que tout autre détail que l'auteur jugerait utile à la rédaction.

Références

Toute référence devrait être citée selon le style dit de Vancouver; voir le *Journal de l'Association médicale canadienne* 1985;132:401-5. Les auteurs sont responsables de l'exactitude de leurs références. Les communications de nature personnelle ne sont pas acceptables comme références. Il ne faut citer une référence à un ouvrage inédit que si ce dernier est disponible à une adresse indiquée par l'auteur.

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Editorial Address/Rédaction:

Peter Schoenberg, Editor
Library Services
Glenrose Rehabilitation Centre
10230 - 111th Ave
Edmonton, Alberta T5G 0B7

Tel: (403) 471-2262 ext 2599
FAX: (403) 471-7976
ENVOY: GLENROSE.REHAB

Subscription Address/Abonnements:

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